

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

ADDRESS (number and street) 2 1/2 Beacon St
Concord
Concord NH 03301
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00178038
3. IS THIS REPORT NEW (N) **OR** 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 Quarterly 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 (12G)
Election on 11 02 2004 in the State of NH
(d) 30-Day **Post -Election** Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2004 through 10 13 2004

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 Martha Fuller Clark

Signature of Treasurer Electronically Filed by Martha Fuller Clark Date 06 07 2006

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**

Write or Type Committee Name
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	0	4

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		226601.22
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period	700391.42									
(c) Total Receipts (from Line 19)	643250.05	2109228.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1343641.47	2335830.04								
7. Total Disbursements (from Line 31)	270987.74	1263176.31								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1072653.73	1072653.73								
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)	29657.85									

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
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	0	4

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	182137.00	577662.38
(i) Itemized (use Schedule A)	43067.00	193574.60
(ii) Unitemized	225204.00	771200.98
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	29861.32
(b) Political Party Committees	37400.00	254675.00
(c) Other Political Committees (such as PACs)	262604.00	1055737.30
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	380646.05	902816.82
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	121787.87
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	20.44
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	313.03
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	28553.36
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	28553.36
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	643250.05	2109228.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	643250.05	2080675.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	22568.50
(ii) Non-Federal Share.....	0.00	40121.98
(b) Other Federal Operating Expenditures.....	79238.09	873114.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	79238.09	935805.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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	191749.65	327370.96
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	191749.65	327370.96
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	270987.74	1263176.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 31).....	270987.74	1223054.33

DETAILED SUMMARY PAGE
of Disbursements

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)	262604.00	1055737.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	262604.00	1055737.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	79238.09	895683.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	121787.87
38. Net Operating Expenditures (subtract Line 37 from Line 36)	79238.09	773895.50

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Mark A. Abramson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 1819 Elm St		Transaction ID: C63666	
City Manchester	State NH	Amount of Each Receipt this Period 1000.00	
Zip Code 03104-2910		FEC ID number of contributing federal political committee. C	
Name of Employer Abramson, Reis, Brown, & Dugan	Occupation Attorney	Aggregate Year-to-Date ▼ 1000.00	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Hon. Susan W. Almy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 266 Poverty Ln		Transaction ID: C63673	
City Lebanon	State NH	Amount of Each Receipt this Period 1000.00	
Zip Code 03766-2730		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired	Aggregate Year-to-Date ▼ 6910.00	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Ms. Ann L Bawa		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 6 Preserve Dr		Transaction ID: C63488	
City Nashua	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03064-8107		FEC ID number of contributing federal political committee. C	
Name of Employer Retired	Occupation Retired Computer Programmer	Aggregate Year-to-Date ▼ 300.00	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	2100.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 107		
	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Daniel E Blore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 4 Appletree Sq		Transaction ID: C63517	
City Bloomington	State MN	Zip Code 55425	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made		Occupation Best Efforts Made	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) B. Mr. Daniel E Blore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 4 Appletree Sq		Transaction ID: C63518	
City Bloomington	State MN	Zip Code 55425	Amount of Each Receipt this Period 70.00
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made		Occupation Best Efforts Made	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) C. Mr. Richard L. Bouley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 2 N Curtisville Rd		Transaction ID: C63443	
City Concord	State NH	Zip Code 03301-5906	Amount of Each Receipt this Period 450.00
FEC ID number of contributing federal political committee. C			
Name of Employer Bouley & Associates		Occupation Lobbyist	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	620.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Kathleen Bremer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4	
Mailing Address 128 Old Milford Rd		Transaction ID: C63611	
City State Zip Code Brookline NH 03033-2475		Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. Mr. George Bruno		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 15 Stark St.		Transaction ID: C63444	
City State Zip Code Manchester NH 03101		Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation attorney			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1910.00	

Full Name (Last, First, Middle Initial) C. Mr. George Bruno		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4	
Mailing Address 15 Stark St.		Transaction ID: C63656	
City State Zip Code Manchester NH 03101		Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C			
Name of Employer self Occupation attorney			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1910.00	

SUBTOTAL of Receipts This Page (optional) ▶	240.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 107
	(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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Mr. William P Burke Mailing Address 5 Squier Dr City North Hampton State NH Zip Code 03862 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4 Transaction ID: C63761 Amount of Each Receipt this Period 1000.00
Name of Employer: Fisher Scientific Occupation: Human Resources Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		

B. Full Name (Last, First, Middle Initial) Ms. Virginia Burns Mailing Address 41 A Cushing St City Cambridge State MA Zip Code 02138 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4 Transaction ID: C63539 Amount of Each Receipt this Period 700.00
Name of Employer: Retired Occupation: Retired Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 700.00		

C. Full Name (Last, First, Middle Initial) Mr. Wayne M. Burton Mailing Address 106 Madbury Rd City Durham State NH Zip Code 03824-2012 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 4 Transaction ID: C63682 Amount of Each Receipt this Period 200.00
Name of Employer: North Shore Community Col- l. Occupation: College President Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional)	▶	1900.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Hope Butterworth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 90 Stickney Hill Rd		Transaction ID: C63717	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Photographer			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert Casby		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 199 Dutton Rd		Transaction ID: C63873	
City State Zip Code Sudbury MA 01776		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Sugarman & Sugarman Occupation Attorney			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Ms. Michelle M Cogan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address PO Box 11599		Transaction ID: C63755	
City State Zip Code St Thomas VI 00801		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made Occupation Best Efforts Made			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	6350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 107
	(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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Nancy Colizzo		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 120 Georgetown Rd		Transaction ID: C63759	
City State Zip Code West Newbury MA 01985-2115		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer New England Healthcare Foundation		Occupation Physician	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Mr. James D Colt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 18 Larch Row		Transaction ID: C63746	
City State Zip Code Wenham MA 01984		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1195.00	

Full Name (Last, First, Middle Initial) C. Committee on Political Education		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 815 Sixteenth St NW		Transaction ID: C63560	
City State Zip Code Washington DC 20006		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional) ▶	7900.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Robert V Costello

Mailing Address 186 Payson Rd

City Belmont State MA Zip Code 02478

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

Name of Employer Duane Morris Occupation Attorney

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63862

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
Mr. Stephen T. Crary

Mailing Address 80 Lyme Road

City Hanover State NH Zip Code 03755

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

Name of Employer retired Occupation retired

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 4

Transaction ID: C63429

Amount of Each Receipt this Period
210.00

C. Full Name (Last, First, Middle Initial)
Mr. Frank P Davidson

Mailing Address 151 Main St

City Concord State MA Zip Code 01742

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

Name of Employer retired Occupation retired

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63866

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)	▶	12710.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. James M. Demers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 951 Ocean Blvd		Transaction ID: C63846	
City State Zip Code Hampton NH 03842-1449	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Demers Group	Occupation Lobbyist		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) B. Mr. Fernando J Domenech		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 161 Warren Ave		Transaction ID: C63369	
City State Zip Code Boston MA 02116	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Domenech & Krochmaniz	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. Dudley Dudley		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 25 Woodland Ave		Transaction ID: C63484	
City State Zip Code Durham NH 03824-2208	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Political Consultant		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 880.00		

SUBTOTAL of Receipts This Page (optional) ▶	870.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. John P. Dunfey		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 230 Commerce Way		Transaction ID: C63709	
City Portsmouth	State NH	Amount of Each Receipt this Period 1000.00	
Zip Code 03801-3274			
FEC ID number of contributing federal political committee. C			
Name of Employer Citizen's Circle	Occupation Investor		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. Timothy J. Durkin		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 900 Central Rd		Transaction ID: C63765	
City Rye Beach	State NH	Amount of Each Receipt this Period 1500.00	
Zip Code 03871			
FEC ID number of contributing federal political committee. C			
Name of Employer Latona Associates	Occupation Investment Management		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Mr. Kris E. Durmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4	
Mailing Address 17 Berkeley St		Transaction ID: C63653	
City Nashua	State NH	Amount of Each Receipt this Period 250.00	
Zip Code 03064-2310			
FEC ID number of contributing federal political committee. C			
Name of Employer Smith Weiss Shepard and Durmer	Occupation attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	2750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Judith Englander		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 28 Hall Ave		Transaction ID: C63723	
City State Zip Code Henniker NH 03242-3348		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation book keeper			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 285.00	

Full Name (Last, First, Middle Initial) B. Mr. Harley G. Featherston		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 16 Pleasant St		Transaction ID: C63485	
City State Zip Code Salem NH 03079-2907		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired Occupation retired			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1970.00	

Full Name (Last, First, Middle Initial) C. Mr. Lawrence S Finkelstein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4	
Mailing Address 55 Kent Lane E-208		Transaction ID: C63617	
City State Zip Code Nashua NH 03062		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired Occupation retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 525.00	

SUBTOTAL of Receipts This Page (optional) ▶	1450.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: PAGE 16 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mrs. Hilda M. Fleisher

Mailing Address 300 River Rd

City State Zip Code
Manchester NH 03104-2401

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

Name of Employer Occupation
retired retired

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1850.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 4

Transaction ID: C63712

Amount of Each Receipt this Period
250.00

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

Mailing Address PO Box 427

City State Zip Code
Alstead NH 03602

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

Name of Employer Occupation
retired retired

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 4

Transaction ID: C63708

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mr. Matthew Friel

Mailing Address 52 Peabody Dr

City State Zip Code
Brentwood NH 03833

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

Name of Employer Occupation
Gentek, Inc CFO

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 4

Transaction ID: C63763

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 107		
	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Sara Goodman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4	
Mailing Address 144 Goose Pond Rd		Transaction ID: C63688	
City Lyme	State NH	Zip Code 03768-3608	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Lyme School District	Occupation teacher		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00		

Full Name (Last, First, Middle Initial) B. Alan Green		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 46 Glen Ave		Transaction ID: C63766	
City Newton Center	State MA	Zip Code 02459-2010	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer The Green Co.	Occupation Real Estate Developer		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Mr. Donald I Hay		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 70 Kirkland St Unit 6		Transaction ID: C63779	
City Cambridge	State MA	Zip Code 02138	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Anthony M Helies		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 45 Shady Hill Rd		Transaction ID: C63661	
City State Zip Code Weston MA 02493		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed Occupation Consultant			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Kurt Hemr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 1 Government Way BAD ADDRESS		Transaction ID: C63375	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made Occupation Best Efforts Made			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) C. Kurt Hemr		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 1 Government Way BAD ADDRESS		Transaction ID: C63376	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made Occupation Best Efforts Made			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	1225.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Ms. Catherine E Henn Mailing Address 6 Walnut Ave City Cambridge State MA Zip Code 02140 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4 Transaction ID: C63561 Amount of Each Receipt this Period 1000.00
Name of Employer Not Employed Occupation Not Employed Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Mr. John W. Hennessey, Jr. Mailing Address 80 Lyme Rd Unit 1038 City Hanover State NH Zip Code 03755-1225 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4 Transaction ID: C63618 Amount of Each Receipt this Period 1000.00
Name of Employer N/A Occupation Retired Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) MRS. Charlotte Hill Mailing Address 223 E Shore Dr City Silver Lake State NH Zip Code 03875-4005 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4 Transaction ID: C63436 Amount of Each Receipt this Period 250.00
Name of Employer Retired Occupation Retired Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Robert Hodes		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4
Mailing Address 787 Seventh Ave		Transaction ID: C63640
City State Zip Code New York NY 10019	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Wilkie, Farr & Gallagher LLP	Occupation Attorney	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Mr. F Sherman Hoyt		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 69 Abrams Hill		Transaction ID: C63848
City State Zip Code Duxbury MA 02332	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) C. Mrs. Elizabeth C. Janeway		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4
Mailing Address 225 Tyler Rd		Transaction ID: C63651
City State Zip Code Webster NH 03303-7733	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer self	Occupation homemaker	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

SUBTOTAL of Receipts This Page (optional) ▶	8300.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 107
	(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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Frank Jellinek Mailing Address 70 Sea Rd City Rye Beach State NH Zip Code 03871-9003 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4 Transaction ID: C63760 Amount of Each Receipt this Period 7500.00
Name of Employer: Fisher Scientific Occupation: President Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7500.00

B. Full Name (Last, First, Middle Initial) Mr. Richard D. Jenkinson Mailing Address 76 Exeter Rd City North Hampton State NH Zip Code 03862-2004 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4 Transaction ID: C63830 Amount of Each Receipt this Period 500.00
Name of Employer: Fisher Scientific Occupation: VP Public Affairs Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00

C. Full Name (Last, First, Middle Initial) Mr. Richard A Johnston Mailing Address 43 Monument Ave City Boston State MA Zip Code 02129 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4 Transaction ID: C63758 Amount of Each Receipt this Period 1000.00
Name of Employer: Hale & Dorr LLP Occupation: Attorney Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	▶	9000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Robert Keefe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 7 Wainwright Rd Unit 67		Transaction ID: C63864	
City State Zip Code Winchester MA 01890		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Best Efforts Made Best Efforts Made			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Ms. Jane R Kitchen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 1735 Lenhill Ct		Transaction ID: C63721	
City State Zip Code Petoskey MI 49770-8726		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation N/A Retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Mr. Adam R Koepfel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 80 Santa Clara Ave		Transaction ID: C63863	
City State Zip Code San Francisco CA 94127		Amount of Each Receipt this Period 1120.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Not Employed Full-time Student at Tufts University			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1120.00	

SUBTOTAL of Receipts This Page (optional) ▶	3170.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jenny Krinsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 1053 Jaffrey Rd		Transaction ID: C63527	
City State Zip Code Marlborough NH 03455-2810		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Not Employed Occupation Homemaker			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Mrs. Addie Lambarth		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 18B Appletree Dr		Transaction ID: C63438	
City State Zip Code Goffstown NH 03045-2110		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer retired Occupation retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Mr. James B Lampert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 148 Washington St		Transaction ID: C63756	
City State Zip Code Duxbury MA 02332		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Hale & Dorr LLD Occupation Attorney			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	1550.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 107		
	<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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Alan Leventhal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 1 Federal St Beacon Capital Partners		Transaction ID: C63506	
City State Zip Code Boston MA 02110-2012	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Beacon Companies	Occupation Managing Partner		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. Muriel Leventhal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 1 Federal St		Transaction ID: C63508	
City State Zip Code Boston MA 02110	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) C. Mr. Norman B Leventhal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 1 Federal St 26th Fl		Transaction ID: C63507	
City State Zip Code Boston MA 02110	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional) ▶	30000.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Sherry M Leventhal		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 18 Pine Rd		Transaction ID: C63509	
City State Zip Code Chestnut Hill MA 02467		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. Mr. Ralph H Loring		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 54 Dunster Rd #1		Transaction ID: C63419	
City State Zip Code Jamaica Plain MA 02130		Amount of Each Receipt this Period 220.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Northeastern University Professor			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. Mr. Ralph H Loring		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 54 Dunster Rd #1		Transaction ID: C63402	
City State Zip Code Jamaica Plain MA 02130		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Northeastern University Professor			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional) ▶	10320.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 107						
	(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

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Ms. Anne L Lougee Mailing Address 34 Warwick Rd City Belmont State MA Zip Code 02478 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4 Transaction ID: C63865 Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed Occupation Business Development Consultant Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1500.00		

B. Full Name (Last, First, Middle Initial) Mr. Francis Lynch Mailing Address 155 Edward Foster Rd City Scituate State MA Zip Code 02066 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4 Transaction ID: C63872 Amount of Each Receipt this Period 2000.00
Name of Employer Keegan Werlin & Pabian LLP Occupation Attorney Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2000.00		

C. Full Name (Last, First, Middle Initial) Mr. Paul A Maeder Mailing Address 16 Fayerweather St City Cambridge State MA Zip Code 02138 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4 Transaction ID: C63662 Amount of Each Receipt this Period 10000.00
Name of Employer Highland Capital Partners Occupation Venture Capitalist Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional)	▶	13000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Daniel P Matthews		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 280 Hillside Ave		Transaction ID: C63664	
City Needham	State MA	Zip Code 02494	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer County of Norfolk	Occupation Exec Assitant		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Mary A Mccann		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 161 Claflin St		Transaction ID: C63835	
City Belmont	State MA	Zip Code 02478	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Mr. William G Meserve		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 11 Cabot St		Transaction ID: C63868	
City Winchester	State MA	Zip Code 01890	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Jerome Meyer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 21 Highland St		Transaction ID: C63423	
City State Zip Code New Haven CT 06511		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Self Employed Clinical Psychologist			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Ms. Martha C Moore		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 331 Waverly St		Transaction ID: C63579	
City State Zip Code Belmont MA 02478		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Homemaker Homemaker			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Rebecca S New		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 485 Lincoln Avenue		Transaction ID: C63467	
City State Zip Code Portsmouth NH 03801		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Tufts University Professor			
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Sheila O'brien		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 275 Almond Way		Transaction ID: C63556	
City State Zip Code Healdsburg CA 95448-4348		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer N/A Occupation Retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Ms. Leslie Oelsner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 1451 N Canterbury Rd		Transaction ID: C63854	
City State Zip Code Fayetteville AR 72701-2861		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Occupation Social Worker			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Ms. Alison Palmer		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 70 Lookout Rd		Transaction ID: C63665	
City State Zip Code Wellfleet MA 02667		Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Occupation Retired			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 4000.00	

SUBTOTAL of Receipts This Page (optional) ▶	4350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mr. Michael A Pellegrini

Mailing Address 69 Perry Rd

City Bedford State NH Zip Code 03110

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

Name of Employer AR Pellegrini & Associates, INC Occupation President

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63869

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Edward H Pendergast

Mailing Address 21 Kenmore Rd

City Belmont State MA Zip Code 02478

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

Name of Employer Pendergast & Company Occupation President

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63871

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Ms. Anna W Rasmussen

Mailing Address 393 Estabrook Rd

City Concord State MA Zip Code 01742

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

Name of Employer Not Employed Occupation Homemaker

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 4

Transaction ID: C63559

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Robert Rieger		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address		Transaction ID: C63762	
City State Zip Code AZ		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Fischer Scientific		Occupation President	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. David Roberts		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 80 Lyme Rd Apt 331		Transaction ID: C78945	
City State Zip Code Hanover NH 3755		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Beth Rodd		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address PO Box 337		Transaction ID: C63465	
City State Zip Code Bradford NH 03221		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed		Occupation Social Worker	
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	1700.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. George Roussos, ESQ		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 14 Auburn St		Transaction ID: C63670	
City State Zip Code Concord NH 03301-3003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Orr & Reno	Occupation attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Mr. Fred A. Seigel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 33 Woodland Rd		Transaction ID: C63510	
City State Zip Code North Hampton NH 03862-2333	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Beacon Capital Partners, LLC	Occupation President		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) C. Mr. Steven Shulman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 29 Old Locke Road		Transaction ID: C63768	
City State Zip Code North Hampton NH 03862	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer The Hampton Group	Occupation Chairman		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	11250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Stephanie Sidell-sokolove		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 744 Newton St		Transaction ID: C63663	
City State Zip Code Chestnut Hill MA 02467	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Stephanie's on Newbury	Occupation Restaurant Owner		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

Full Name (Last, First, Middle Initial) B. Mr. William C Siegel		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 45 Warwick Rd		Transaction ID: C63870	
City State Zip Code Belmont MA 02478	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Bridgewater Goddard Park	Occupation Physician		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. Mr. Samuel Sloan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address PO Box 1		Transaction ID: C63784	
City State Zip Code Lynnfield MA 01940	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Best Efforts Made	Occupation Best Efforts Made		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional) ▶	11250.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Jane A Smith		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address 49 Deerfoot Rd		Transaction ID: C63598	
City Southborough	State MA	Zip Code 01772	Amount of Each Receipt this Period 450.00
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) B. Hon. Hilda Weyl Sokol		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4	
Mailing Address 6 Storrs Rd		Transaction ID: C63612	
City Hanover	State NH	Zip Code 03755-2410	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C			
Name of Employer State of NH Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Representative NH House Aggregate Year-to-Date ▼ 245.00		

Full Name (Last, First, Middle Initial) C. Ms. Heather Stachtiaris		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 11 Azalea Way		Transaction ID: C63764	
City Boxford	State MA	Zip Code 01921	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1530.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Ms. Kathleen N. Sullivan

Mailing Address 192 S Mammoth Rd

City Manchester State NH Zip Code 03109-4908

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

Name of Employer Wadleigh, Starr & Peters Occupation attorney

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63847

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
A. Robert Thoresen

Mailing Address 100 Kensington Rd

City Portsmouth State NH Zip Code 03801-4987

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

Name of Employer Stafford Consulting Group, Ltd Occupation Planner & Developer

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 4

Transaction ID: C63850

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Ms. Heidi Trilsch

Mailing Address 2 1/2 Beacon St

City Concord State NH Zip Code 03301

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

Name of Employer Best Efforts Made Occupation Best Efforts Made

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 4

Transaction ID: C63370

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Elaine Tung		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4	
Mailing Address 5 Franklin Rd		Transaction ID: C63867	
City Lexington	State MA	Amount of Each Receipt this Period 1000.00	
Zip Code 02420			
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Mr. Joseph Valle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 1007 High St		Transaction ID: C63754	
City Dedham	State MA	Amount of Each Receipt this Period 2500.00	
Zip Code 02026-5718			
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) C. Atty. Martha Van Oot		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4	
Mailing Address 132 Main St		Transaction ID: C63659	
City Hopkinton	State NH	Amount of Each Receipt this Period 250.00	
Zip Code 03229-2625			
FEC ID number of contributing federal political committee. C			
Name of Employer Orr & Reno	Occupation Attorney		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

SUBTOTAL of Receipts This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Jocelyn VanBokkelen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 4	
Mailing Address 45 Hilldale Ave		Transaction ID: C63681	
City State Zip Code South Hampton NH 03827	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Best Efforts Made Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Ms. Lynn Waskelis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 2 Rue Raspail		Transaction ID: C63752	
City State Zip Code 13200 Arles (Franc) FR 00000	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) C. Ms. Lynn Waskelis		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 2 Rue Raspail		Transaction ID: C63753	
City State Zip Code 13200 Arles (Franc) FR 00000	Amount of Each Receipt this Period 170.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 270.00		

SUBTOTAL of Receipts This Page (optional) ▶	1270.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. David Weil		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 22 Glenn Rd		Transaction ID: C63827	
City Belmont	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 02478			
FEC ID number of contributing federal political committee. C			
Name of Employer Boston University	Occupation Professor		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Hon. Katherine W. Wheeler		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 4	
Mailing Address 27 Mill Rd		Transaction ID: C63700	
City Durham	State NH	Amount of Each Receipt this Period 500.00	
Zip Code 03824-3006			
FEC ID number of contributing federal political committee. C			
Name of Employer Not Employed	Occupation Not Employed		
Receipt For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) C. Mr. Todd Wilson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4	
Mailing Address 5 Hillside Ave		Transaction ID: C63757	
City Exeter	State NH	Amount of Each Receipt this Period 3000.00	
Zip Code 03833			
FEC ID number of contributing federal political committee. C			
Name of Employer Fischer Scientific Worldw- ide	Occupation Vice President		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

SUBTOTAL of Receipts This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 / 107
	(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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Ms. Dorothy J. Yanish		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4	
Mailing Address PO Box 606		Transaction ID: C63525	
City Peterborough	State NH	Zip Code 03458-0606	Amount of Each Receipt this Period 482.00
FEC ID number of contributing federal political committee. C			
Name of Employer Franklin Pierce College	Occupation Professor		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 482.00		

B. Full Name (Last, First, Middle Initial) Mr. James B. Zeppieri		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4	
Mailing Address 656 Main St		Transaction ID: C63425	
City Contoocook	State NH	Zip Code 03229-3001	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer NH Dept. of Environmental Services	Occupation Geologist		
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2050.00		

SUBTOTAL of Receipts This Page (optional) ▶	2482.00
TOTAL This Period (last page this line number only) ▶	182137.00

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

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

FOR LINE NUMBER: PAGE 40 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
AFSCME People pAC
Mailing Address 1625 L St NW
City State Zip Code
Washington DC 20036-5665
FEC ID number of contributing federal political committee. **C** C00189415
Name of Employer Occupation
Receipt For: 2004
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 4
Transaction ID: C63558
Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Communication Workers of America
Mailing Address 501 3rd St NW
City State Zip Code
Washington DC 20001-2760
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2004
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 4
Transaction ID: C63638
Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
Paul Hodes for Congress
Mailing Address 26 South Main Street
City State Zip Code
Concord NH 03301
FEC ID number of contributing federal political committee. **C** C00400077
Name of Employer Occupation
Receipt For: 2004
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
7550.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 4
Transaction ID: C63430
Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 9500.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 107
	<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Paul Hodes for Congress		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4	
Mailing Address 26 South Main Street		Transaction ID: C63658	
City State Zip Code Concord NH 03301		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C C00400077			
Name of Employer Occupation			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7550.00	

Full Name (Last, First, Middle Initial) B. Planned Parenthood		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 1780 Massachusetts Avenue		Transaction ID: C63668	
City State Zip Code Washington DC 20036		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00314617			
Name of Employer Occupation			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Running for Change		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4	
Mailing Address 819 Euclid St NW		Transaction ID: C63669	
City State Zip Code Washington DC 20001		Amount of Each Receipt this Period 10000.00	
FEC ID number of contributing federal political committee. C C00393678			
Name of Employer Occupation			
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional) ▶	15400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 107
(check only one)

<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
SEIU COPE Fund

Mailing Address 1313 L St NW

City Washington State DC Zip Code 20005-4101

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

Name of Employer Occupation

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 07 / 2004
Transaction ID: C63667
 Amount of Each Receipt this Period: 5000.00

B. Full Name (Last, First, Middle Initial)
Tom Lantos for Congress Committee

Mailing Address PO Box 611

City Burlingame State CA Zip Code 94011-0611

FEC ID number of contributing federal political committee. **C** C00112250

Name of Employer Occupation

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 12 / 2004
Transaction ID: C63714
 Amount of Each Receipt this Period: 2500.00

C. Full Name (Last, First, Middle Initial)
UA Political Educati

Mailing Address 901 Massachusetts Ave NW

City State Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 13 / 2004
Transaction ID: C63874
 Amount of Each Receipt this Period: 5000.00

SUBTOTAL of Receipts This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	37400.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 107
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Democratic National Committee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 430 S Capitol St SE		Transaction ID: C63368
City State Zip Code Washington DC 20003-4024	Amount of Each Receipt this Period 177401.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Political Committee Aggregate Year-to-Date ▼ 847726.17	

Full Name (Last, First, Middle Initial) B. Democratic National Committee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 4
Mailing Address 430 S Capitol St SE		Transaction ID: C63660
City State Zip Code Washington DC 20003-4024	Amount of Each Receipt this Period 82256.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Political Committee Aggregate Year-to-Date ▼ 847726.17	

Full Name (Last, First, Middle Initial) C. Democratic National Committee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4
Mailing Address 430 S Capitol St SE		Transaction ID: C63750
City State Zip Code Washington DC 20003-4024	Amount of Each Receipt this Period 11254.50	
FEC ID number of contributing federal political committee. C		
Name of Employer Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Political Committee Aggregate Year-to-Date ▼ 847726.17	

SUBTOTAL of Receipts This Page (optional) ▶	270911.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: PAGE 44 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

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

Name of Employer Occupation
Political Committee

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
847726.17

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2004

Transaction ID: C63751

Amount of Each Receipt this Period
1800.00

B. Full Name (Last, First, Middle Initial)
Democratic National Committee

Mailing Address 430 S Capitol St SE

City State Zip Code
Washington DC 20003-4024

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

Name of Employer Occupation
Political Committee

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
847726.17

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2004

Transaction ID: C63861

Amount of Each Receipt this Period
10250.00

C. Full Name (Last, First, Middle Initial)
John Kerry for President Inc

Mailing Address 519 C St Ne

City State Zip Code
Washington DC 20002-5809

FEC ID number of contributing federal political committee. **C** C00383653

Name of Employer Occupation

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
231000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2004

Transaction ID: C63877

Amount of Each Receipt this Period
80000.00

SUBTOTAL of Receipts This Page (optional) ► **92050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 45 / 107	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial)
Shaheen for Senate Committee

Mailing Address 2 1/2 Beacon St

City	State	Zip Code
Concord	NH	03301

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

Name of Employer	Occupation

Receipt For: 2004
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17684.55

Date of Receipt

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

Transaction ID: C63511

Amount of Each Receipt this Period
17684.55

SUBTOTAL of Receipts This Page (optional)	▶	17684.55
TOTAL This Period (last page this line number only)	▶	380646.05

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)

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<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

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abigail Ammerman		Transaction ID: D8217 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Ms. Abigail Ammerman		Transaction ID: D8447 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 360.38	
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. ADAM BERGER		Transaction ID: D8110 Date of Disbursement 10 / 01 / 2004	
Mailing Address 12 BOBBYS LN		Amount of Each Disbursement this Period 474.79	
City Hudson State NH Zip Code 03051	Purpose of Disbursement Payroll Expenses	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	1035.17
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Greta Braddock		Transaction ID: D8237 Date of Disbursement 10 / 01 / 2004	
Mailing Address 227 Burnt Hill		Amount of Each Disbursement this Period 200.00	
City Warner State NH Zip Code 03278	Purpose of Disbursement Technology Stipend+	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Kyle Brandon		Transaction ID: D8449 Date of Disbursement 10 / 07 / 2004	
Mailing Address 2 Beacon Street		Amount of Each Disbursement this Period 500.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Field Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Mr. Garrett Bridgens		Transaction ID: D8222 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Brush Hill Tours		Transaction ID: D6304 Date of Disbursement 10 / 07 / 2004	
Mailing Address 1 Main St		Amount of Each Disbursement this Period 1550.00	
City Randolph State MA Zip Code 02368	Purpose of Disbursement Transportation	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mark Bubrski		Transaction ID: D8225 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 25		Amount of Each Disbursement this Period 200.00	
City Hanover State NH Zip Code 03755	Purpose of Disbursement Technology Stipend	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mark Bubrski		Transaction ID: D6254 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 25		Amount of Each Disbursement this Period 743.46	
City Hanover State NH Zip Code 03755	Purpose of Disbursement Reimbursement: Supplies	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2493.46
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mark Bubriski		Transaction ID: D6339 Date of Disbursement 10 / 13 / 2004
Mailing Address PO Box 25		Amount of Each Disbursement this Period 250.00
City Hanover	State NH Zip Code 03755	
Purpose of Disbursement Reimbursement: Supplies		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Hon. Raymond Buckley		Transaction ID: D6258 Date of Disbursement 10 / 01 / 2004
Mailing Address 24 Gabrielle St		Amount of Each Disbursement this Period 5000.00
City Manchester	State NH Zip Code 03103-3902	
Purpose of Disbursement Consulting: Event Coordination		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ms. Pia Carusone		Transaction ID: D8211 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord	State NH Zip Code 03301	
Purpose of Disbursement Technology Stipend		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	5450.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Pia Carusone		Transaction ID: D8446 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 31.08
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D8108 Date of Disbursement 10 / 01 / 2004
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 237.11
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes-FUTA Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D8107 Date of Disbursement 10 / 01 / 2004
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 13245.68
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Payroll Taxes Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	13513.87
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D8122 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 115.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D8124 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 5.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D8123 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 10.00
City Concord State NH Zip Code 03301-4900	Purpose of Disbursement Bank Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D8125 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 80.00
City Concord State NH Zip Code 03301-4900	Category/ Type	
Purpose of Disbursement Bank Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D8126 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 25.00
City Concord State NH Zip Code 03301-4900	Category/ Type	
Purpose of Disbursement Bank Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Citizens Bank		Transaction ID: D8127 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 73.80
City Concord State NH Zip Code 03301-4900	Category/ Type	
Purpose of Disbursement Bank Fees		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	178.80
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Citizens Bank		Transaction ID: D8128 Date of Disbursement 10 / 13 / 2004
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 12.50
City Concord	State NH	
Zip Code 03301-4900		
Purpose of Disbursement Bank Fees		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Citizens Bank		Transaction ID: D8452 Date of Disbursement 10 / 13 / 2004
Mailing Address 1 Capital Plz		Amount of Each Disbursement this Period 12.00
City Concord	State NH	
Zip Code 03301-4900		
Purpose of Disbursement Bank Fee		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. City of Concord		Transaction ID: D6268 Date of Disbursement 10 / 05 / 2004
Mailing Address 41 Green St		Amount of Each Disbursement this Period 150.00
City Concord	State NH	
Zip Code 03301-4255		
Purpose of Disbursement Voter File		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ► **174.50**

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. City of Manchester		Transaction ID: D6282 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4
Mailing Address Traffic 480 Hayward St Dept Of		Amount of Each Disbursement this Period 37.00
City Manchester State NH Zip Code 03103	Category/ Type	
Purpose of Disbursement Voter List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. City of Nashua		Transaction ID: D6278 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4
Mailing Address Main St		Amount of Each Disbursement this Period 30.00
City Nashua State NH Zip Code 03060	Category/ Type	
Purpose of Disbursement Voter List		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mr. James Coleman		Transaction ID: D8441 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 8086 Tate Rd		Amount of Each Disbursement this Period 69.95
City Richmond State VA Zip Code 00546	Category/ Type	
Purpose of Disbursement Reimbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	136.95
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Christy Cunningham		Transaction ID: D8208 Date of Disbursement 10 / 01 / 2004
Mailing Address 92 Gilford Ave. Apt. 1		Amount of Each Disbursement this Period 200.00
City Laconia	State NH Zip Code 03246	
Purpose of Disbursement Technology Stipend		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Christy Cunningham		Transaction ID: D6343 Date of Disbursement 10 / 13 / 2004
Mailing Address 92 Gilford Ave. Apt. 1		Amount of Each Disbursement this Period 54.39
City Laconia	State NH Zip Code 03246	
Purpose of Disbursement Reimbursement: Mileage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DCS Campaign		Transaction ID: D6305 Date of Disbursement 10 / 07 / 2004
Mailing Address Pennsylvania Ave		Amount of Each Disbursement this Period 2000.00
City Washington	State DC Zip Code 20002	
Purpose of Disbursement Email Service		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2254.39
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Dumez		Transaction ID: D8226 Date of Disbursement 10 / 01 / 2004
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 200.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Technology Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mr. Brian Dumez		Transaction ID: D6302 Date of Disbursement 10 / 07 / 2004
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 45.00
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement Reimbursement: Supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dunbar Bus		Transaction ID: D6303 Date of Disbursement 10 / 07 / 2004
Mailing Address PO Box 1		Amount of Each Disbursement this Period 650.00
City Tyngsboro State MA Zip Code 01879	Purpose of Disbursement Transportation Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► **895.00**

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Elworthy		Transaction ID: D8219 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mr. Brian Elworthy		Transaction ID: D6341 Date of Disbursement 10 / 13 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 43.70
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Evergreen Press		Transaction ID: D6325 Date of Disbursement 10 / 07 / 2004
Mailing Address 60 Rogers St		Amount of Each Disbursement this Period 10250.00
City Manchester State NH Zip Code 03103-5070	Purpose of Disbursement Printing Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Kerry Lit for volunteer Canvasses

SUBTOTAL of Disbursements This Page (optional) ▶	10493.70
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Benjamin Forsdick		Transaction ID: D8212 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Technology Stipend			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Franklin City Democrats		Transaction ID: D6334 Date of Disbursement 10 / 11 / 2004	
Mailing Address Main St		Amount of Each Disbursement this Period 500.00	
City Franklin	State NH	Zip Code 03235	Category/ Type
Purpose of Disbursement Office Rent			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. Steve Gerencser		Transaction ID: D8227 Date of Disbursement 10 / 01 / 2004	
Mailing Address 100 Emerald St		Amount of Each Disbursement this Period 200.00	
City Keene	State NH	Zip Code 03431-3610	Category/ Type
Purpose of Disbursement Technology Stipend			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Melanie Gleason		Transaction ID: D8228 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord	State NH	
Zip Code 03301		Category/ Type
Purpose of Disbursement Technology Stipend		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Ms. Melanie Gleason		Transaction ID: D6255 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 240.87
City Concord	State NH	
Zip Code 03301		Category/ Type
Purpose of Disbursement Reimbursement: Supplies		
Candidate Name		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Gordon & Schwenkmeyer		Transaction ID: D6914 Date of Disbursement 10 / 12 / 2004
Mailing Address 300 N Sepulveda Blvd		Amount of Each Disbursement this Period 5723.22
City El Segundo	State CA	
Zip Code 90245-4477		Category/ Type
Purpose of Disbursement Telemarketing Fees		
Candidate Name		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Calls for Lynch for Governor

SUBTOTAL of Disbursements This Page (optional) ▶

6164.09

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Greater Manchester YMCA		Transaction ID: D6306 Date of Disbursement 10 / 07 / 2004
Mailing Address 140 Allard St		Amount of Each Disbursement this Period 1650.00
City Goffstown	State NH Zip Code 03045	
Purpose of Disbursement Room Rental		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Abigail Green		Transaction ID: D8223 Date of Disbursement 10 / 01 / 2004
Mailing Address 14 Garrison Ln		Amount of Each Disbursement this Period 200.00
City Madbury	State NH Zip Code 03823	
Purpose of Disbursement Technology Stipend		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Ms. Abigail Green		Transaction ID: D6342 Date of Disbursement 10 / 13 / 2004
Mailing Address 14 Garrison Ln		Amount of Each Disbursement this Period 78.63
City Madbury	State NH Zip Code 03823	
Purpose of Disbursement Reimbursement: Mileage		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1928.63
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Jeremy Hastings		Transaction ID: D8229 Date of Disbursement 10 / 01 / 2004
Mailing Address 17 Hebron Road		Amount of Each Disbursement this Period 200.00
City Bolton	State CT Zip Code 06043	
Purpose of Disbursement Technology Stipend		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Jeremy Hastings		Transaction ID: D6328 Date of Disbursement 10 / 08 / 2004
Mailing Address 17 Hebron Road		Amount of Each Disbursement this Period 308.00
City Bolton	State CT Zip Code 06043	
Purpose of Disbursement Reimbursement: Supplies		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sarah Holmes		Transaction ID: D8442 Date of Disbursement 10 / 01 / 2004
Mailing Address 43 Old State Rd		Amount of Each Disbursement this Period 168.35
City Charlestown	State NH Zip Code 03603	
Purpose of Disbursement Reimbursement		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

676.35

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Sarah Holmes		Transaction ID: D8230 Date of Disbursement 10 / 01 / 2004	
Mailing Address 43 Old State Rd		Amount of Each Disbursement this Period 200.00	
City Charlestown State NH Zip Code 03603	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Home Depot Salem		Transaction ID: D6323 Date of Disbursement 10 / 07 / 2004	
Mailing Address 289 S Broadway		Amount of Each Disbursement this Period 948.00	
City Salem State NH Zip Code 03079-3357	Purpose of Disbursement Building Materials	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Ms. Elizabeth Ignacio		Transaction ID: D8231 Date of Disbursement 10 / 01 / 2004	
Mailing Address 169 Portsmouth St #5		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301-4164	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	1348.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Keyspan Full Name (Last, First, Middle Initial) Mailing Address 1 Penn's Way City New Castle State DE Zip Code 19720 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D6319 Date of Disbursement 10 / 07 / 2004 Amount of Each Disbursement this Period 184.25 Category/Type
--	--	--

B. Ms. Jennifer L. Kuzma Full Name (Last, First, Middle Initial) Mailing Address 126 N State St City Concord State NH Zip Code 03301-5058 Purpose of Disbursement Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D8444 Date of Disbursement 10 / 01 / 2004 Amount of Each Disbursement this Period 22.00 Category/Type
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C. Ms. Lauren Mattison Full Name (Last, First, Middle Initial) Mailing Address 2 1/2 Beacon St City Concord State NH Zip Code 03301 Purpose of Disbursement Reimbursement: Mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D6251 Date of Disbursement 10 / 01 / 2004 Amount of Each Disbursement this Period 282.31 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	488.56
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Lauren Mattison		Transaction ID: D8201 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Gerry McDonough		Transaction ID: D8438 Date of Disbursement 10 / 01 / 2004	
Mailing Address 13 Hollis St		Amount of Each Disbursement this Period 3500.00	
City Cambridge State MA Zip Code 02140	Purpose of Disbursement Field Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Gerry McDonough		Transaction ID: D6257 Date of Disbursement 10 / 01 / 2004	
Mailing Address 13 Hollis St		Amount of Each Disbursement this Period 439.65	
City Cambridge State MA Zip Code 02140	Purpose of Disbursement Reimbursement: Mileage Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4139.65
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Merchants Rent-A-Car		Transaction ID: D6345 Date of Disbursement 10 / 13 / 2004
Mailing Address PO Box 1218		Amount of Each Disbursement this Period 1500.00
City Hooksett	State NH Zip Code 03101	
Purpose of Disbursement Transportation		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Molloy Sound		Transaction ID: D6320 Date of Disbursement 10 / 07 / 2004
Mailing Address 1200 S Mammoth Rd		Amount of Each Disbursement this Period 800.00
City Manchester	State NH Zip Code 03109-5102	
Purpose of Disbursement Sound System Rental		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Amy Morse		Transaction ID: D8232 Date of Disbursement 10 / 01 / 2004
Mailing Address 36 Modena Dr.		Amount of Each Disbursement this Period 200.00
City Penacook	State NH Zip Code 03303	
Purpose of Disbursement Technology Stipend		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Amy Morse		Transaction ID: D6321 Date of Disbursement 10 / 07 / 2004	
Mailing Address 36 Modena Dr.		Amount of Each Disbursement this Period 356.64	
City Penacook State NH Zip Code 03303	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sarah Mosbacher		Transaction ID: D6256 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 161.69	
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Sarah Mosbacher		Transaction ID: D8207 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	718.33
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Sheehan		Transaction ID: D8214 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Brian Sheehan		Transaction ID: D8445 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 31.28	
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Joshua Eickmeier		Transaction ID: D8204 Date of Disbursement 10 / 01 / 2004	
Mailing Address 525 N Columbia		Amount of Each Disbursement this Period 200.00	
City Seward State NE Zip Code 68434	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	431.28
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Music Factory, Inc		Transaction ID: D6264																					
Mailing Address 114 Londonderry Turnpike		Date of Disbursement																					
City Hooksett State NH Zip Code 03106		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	5	/	2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	5	/	2	0	0	4														
Purpose of Disbursement TV Rental		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>		150.00																			
150.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2004																					
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. Music Factory, Inc		Transaction ID: D6318																					
Mailing Address 114 Londonderry Turnpike		Date of Disbursement																					
City Hooksett State NH Zip Code 03106		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	7	/	2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	7	/	2	0	0	4														
Purpose of Disbursement TV Rental		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>		150.00																			
150.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2004																					
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) C. Music Factory, Inc		Transaction ID: D6333																					
Mailing Address 114 Londonderry Turnpike		Date of Disbursement																					
City Hooksett State NH Zip Code 03106		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>4</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	1	/	2	0	0	4
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	1	/	2	0	0	4														
Purpose of Disbursement TV Rental		Amount of Each Disbursement this Period																					
Candidate Name		<table border="1"> <tr> <td colspan="10">150.00</td> </tr> </table>		150.00																			
150.00																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2004																					
State: District:		<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional)	▶	450.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brendan Neal		Transaction ID: D8206 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mr. Brendan Neal		Transaction ID: D6248 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 272.49
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Ms. Sarah Nolan		Transaction ID: D8216 Date of Disbursement 10 / 01 / 2004
Mailing Address PO Box 156		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03302	Purpose of Disbursement Technology Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	672.49
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Quentin Palfrey		Transaction ID: D8233 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mr. Quentin Palfrey		Transaction ID: D8443 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 15.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mr. Zachary Palmer		Transaction ID: D6250 Date of Disbursement 10 / 01 / 2004
Mailing Address 316 W 3rd St		Amount of Each Disbursement this Period 86.58
City Lewes State DE Zip Code 19958	Purpose of Disbursement Reimbursement: Mileage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	301.58
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Zachary Palmer		Transaction ID: D8213 Date of Disbursement 10 / 01 / 2004	
Mailing Address 316 W 3rd St		Amount of Each Disbursement this Period 200.00	
City Lewes State DE Zip Code 19958	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) B. Plymouth Democrats		Transaction ID: D6335 Date of Disbursement 10 / 11 / 2004	
Mailing Address 1 Main St		Amount of Each Disbursement this Period 500.00	
City Plymouth State NH Zip Code 03264	Purpose of Disbursement Office Rent	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) C. Ms. Alexis Prieur		Transaction ID: D8210 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	900.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Alexis Prieur		Transaction ID: D6266 Date of Disbursement 10 / 05 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 60.89	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Payroll Expenses			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Ms. Ria Riesner		Transaction ID: D8221 Date of Disbursement 10 / 01 / 2004	
Mailing Address 367 Harvard St #3		Amount of Each Disbursement this Period 200.00	
City Cambridge	State MA	Zip Code 02138	Category/ Type
Purpose of Disbursement Technology Stipend			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Ms. Abbe Ross		Transaction ID: D8109 Date of Disbursement 10 / 01 / 2004	
Mailing Address 10 Dearborn Rd		Amount of Each Disbursement this Period 1035.80	
City Northfield	State NH	Zip Code 03276	Category/ Type
Purpose of Disbursement Payroll Expense			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	1296.69
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Daniel Rossi		Transaction ID: D6253 Date of Disbursement 10 / 01 / 2004
Mailing Address 14 Somerville Ave Apt 2		Amount of Each Disbursement this Period 270.47
City Somerville State MA Zip Code 02314	Purpose of Disbursement Reimbursement: Mileage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Mr. Daniel Rossi		Transaction ID: D8218 Date of Disbursement 10 / 01 / 2004
Mailing Address 14 Somerville Ave Apt 2		Amount of Each Disbursement this Period 200.00
City Somerville State MA Zip Code 02314	Purpose of Disbursement Technology Stipend Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Jessica R Rudman		Transaction ID: D8202 Date of Disbursement 10 / 01 / 2004
Mailing Address 9 Ham ST		Amount of Each Disbursement this Period 200.00
City Dover State NH Zip Code 03820	Purpose of Disbursement Technology Stipend Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	670.47
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Scharfenberger Co.		Transaction ID: D6263 Date of Disbursement 10 / 05 / 2004
Mailing Address 2534 Commerce Blvd		Amount of Each Disbursement this Period 6022.30
City Cincinnati State OH Zip Code 45241-1504	Printing of Kerry Specific Signs	
Purpose of Disbursement Printing		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ms. Kindl Shinn		Transaction ID: D8220 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03301	Category/ Type	
Purpose of Disbursement Technology Stipend		Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Justin J. Slattery		Transaction ID: D8234 Date of Disbursement 10 / 01 / 2004
Mailing Address 63 Keyes Hill Rd		Amount of Each Disbursement this Period 200.00
City Pelham State NH Zip Code 03076-3240	Category/ Type	
Purpose of Disbursement Technology Stipend		Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6422.30
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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Justin J. Slattery		Transaction ID: D8439 Date of Disbursement 10 / 01 / 2004	
Mailing Address 63 Keyes Hill Rd		Amount of Each Disbursement this Period 73.94	
City Pelham State NH Zip Code 03076-3240	Purpose of Disbursement Reimbursement Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Anthony Smith		Transaction ID: D8437 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 1264.81	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Strafford County Democrats		Transaction ID: D6259 Date of Disbursement 10 / 01 / 2004	
Mailing Address 16 Isaac Lucs Circle		Amount of Each Disbursement this Period 1000.00	
City Dover State NH Zip Code 03820	Purpose of Disbursement Office Rent Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2338.75
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Strafford County Democrats		Transaction ID: D6337 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4
Mailing Address 16 Isaac Lucs Circle		Amount of Each Disbursement this Period 500.00
City Dover State NH Zip Code 03820	Purpose of Disbursement Office Rent	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Ms. Kathleen Strand		Transaction ID: D8235 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Surplus Office Equipment		Transaction ID: D6348 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 295 Lincoln St		Amount of Each Disbursement this Period 225.00
City Manchester State NH Zip Code 03103	Purpose of Disbursement Equipment Rental	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

925.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Kristin Tarnstrom		Transaction ID: D8215 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon ST		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Telephone Network Technologies		Transaction ID: D6322 Date of Disbursement 10 / 07 / 2004	
Mailing Address 117 Londonderry Tpke		Amount of Each Disbursement this Period 747.50	
City Hooksett State NH Zip Code 03106-2015	Purpose of Disbursement Telephone Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Amanda Tobey		Transaction ID: D8236 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord State NH Zip Code 03301	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1147.50
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. UNH		Transaction ID: D8451 Date of Disbursement 10 / 07 / 2004
Mailing Address 126 Main St		Amount of Each Disbursement this Period 100.00
City Durham	State NH	
Zip Code 03824		Category/ Type
Purpose of Disbursement Room Rental Fee		
Candidate Name		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon		Transaction ID: D6340 Date of Disbursement 10 / 13 / 2004
Mailing Address PO Box 15123		Amount of Each Disbursement this Period 4611.30
City Albany	State NY	
Zip Code 12212-5123		Category/ Type
Purpose of Disbursement Telephone		
Candidate Name		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. Mr. Jesse Wald		Transaction ID: D8224 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon Street		Amount of Each Disbursement this Period 200.00
City Concord	State NH	
Zip Code 03301		Category/ Type
Purpose of Disbursement Technology Stipend		
Candidate Name		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶	4911.30
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Jesse Wald		Transaction ID: D6252 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon Street		Amount of Each Disbursement this Period 336.10	
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement: Mileage Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Jesse Wald		Transaction ID: D6344 Date of Disbursement 10 / 13 / 2004	
Mailing Address 2 1/2 Beacon Street		Amount of Each Disbursement this Period 53.28	
City Concord State NH Zip Code 03301	Purpose of Disbursement Reimbursement: Mileage Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Kasia Witkowski		Transaction ID: D8205 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 8		Amount of Each Disbursement this Period 200.00	
City St Regis Falls State NY Zip Code 12980	Purpose of Disbursement Technology Stipend Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	589.38
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Clark Woolley		Transaction ID: D8203 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 200.00	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Technology Stipend			
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)

200.00

TOTAL This Period (last page this line number only)

77776.19

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abigail Ammerman		Transaction ID: D6356 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 778.46
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Greta Braddock		Transaction ID: D8118 Date of Disbursement 10 / 01 / 2004
Mailing Address 227 Burnt Hill		Amount of Each Disbursement this Period 1272.36
City Warner State NH Zip Code 03278	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mr. Garrett Bridgens		Transaction ID: D6398 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 760.40
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2811.22
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mark Bubriski		Transaction ID: D6402 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 25		Amount of Each Disbursement this Period 778.45	
City Hanover State NH Zip Code 03755	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Pia Carusone		Transaction ID: D8119 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 488.02	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Ms. Pia Carusone		Transaction ID: D6267 Date of Disbursement 10 / 05 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 60.88	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1327.35
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Amanda Coulombe		Transaction ID: D6265 Date of Disbursement 10 / 05 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 411.68	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Christy Cunningham		Transaction ID: D8113 Date of Disbursement 10 / 01 / 2004	
Mailing Address 92 Gilford Ave. Apt. 1		Amount of Each Disbursement this Period 742.47	
City Laconia	State NH	Zip Code 03246	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Mr. Brian Dumez		Transaction ID: D6366 Date of Disbursement 10 / 01 / 2004	
Mailing Address 720 State St. #4		Amount of Each Disbursement this Period 1420.92	
City Portsmouth	State NH	Zip Code 03801	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	2575.07
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Brian Elworthy		Transaction ID: D8112 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 965.02
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Steve Gerencser		Transaction ID: D6394 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 100 Emerald St		Amount of Each Disbursement this Period 1234.80
City Keene State NH Zip Code 03431-3610	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ms. Melanie Gleason		Transaction ID: D6404 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 582.35
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2782.17
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Abigail Green		Transaction ID: D6358 Date of Disbursement 10 / 01 / 2004	
Mailing Address 14 Garrison Ln		Amount of Each Disbursement this Period 796.47	
City Madbury State NH Zip Code 03823	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Jeremy Hastings		Transaction ID: D6374 Date of Disbursement 10 / 01 / 2004	
Mailing Address 17 Hebron Road		Amount of Each Disbursement this Period 1385.92	
City Bolton State CT Zip Code 06043	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sarah Holmes		Transaction ID: D6392 Date of Disbursement 10 / 01 / 2004	
Mailing Address 43 Old State Rd		Amount of Each Disbursement this Period 1109.70	
City Charlestown State NH Zip Code 03603	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3292.09
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Elizabeth Ignacio		Transaction ID: D6370 Date of Disbursement 10 / 01 / 2004
Mailing Address 169 Portsmouth St #5		Amount of Each Disbursement this Period 1079.71
City Concord State NH Zip Code 03301-4164	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ms. Jennifer L. Kuzma		Transaction ID: D6372 Date of Disbursement 10 / 01 / 2004
Mailing Address 126 N State St		Amount of Each Disbursement this Period 1390.92
City Concord State NH Zip Code 03301-5058	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Ms. Lauren Mattison		Transaction ID: D6400 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 760.46
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3231.09
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Amy Morse		Transaction ID: D6364 Date of Disbursement 10 / 01 / 2004	
Mailing Address 36 Modena Dr.		Amount of Each Disbursement this Period 760.47	
City Penacook State NH Zip Code 03303	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ms. Sarah Mosbacher		Transaction ID: D8120 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 771.01	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brian Sheehan		Transaction ID: D8111 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 965.02	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2496.50
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Joshua Eickmeier		Transaction ID: D6378 Date of Disbursement 10 / 01 / 2004	
Mailing Address 525 N Columbia		Amount of Each Disbursement this Period 939.58	
City Seward State NE Zip Code 68434	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mr. Michael A. Vlacich		Transaction ID: D6388 Date of Disbursement 10 / 01 / 2004	
Mailing Address 14 Profile Ave		Amount of Each Disbursement this Period 2265.95	
City Concord State NH Zip Code 03301-5923	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mr. Brendan Neal		Transaction ID: D6368 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 778.46	
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3983.99
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Sarah Nolan		Transaction ID: D8121 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 156		Amount of Each Disbursement this Period 506.02	
City Concord	State NH	Zip Code 03302	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Mr. Quentin Palfrey		Transaction ID: D6406 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 1294.80	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Mr. Zachary Palmer		Transaction ID: D6396 Date of Disbursement 10 / 01 / 2004	
Mailing Address 316 W 3rd St		Amount of Each Disbursement this Period 760.47	
City Lewes	State DE	Zip Code 19958	Category/ Type
Purpose of Disbursement Payroll Expenses		<input type="checkbox"/>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional) ▶	2561.29
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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Alexis Prieur		Transaction ID: D6360 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 778.47
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Ms. Ria Riesner		Transaction ID: D6390 Date of Disbursement 10 / 01 / 2004
Mailing Address 367 Harvard St #3		Amount of Each Disbursement this Period 778.45
City Cambridge State MA Zip Code 02138	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Mr. Daniel Rossi		Transaction ID: D8115 Date of Disbursement 10 / 01 / 2004
Mailing Address 14 Somerville Ave Apt 2		Amount of Each Disbursement this Period 735.01
City Somerville State MA Zip Code 02314	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2291.93
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) Jessica R Rudman		Transaction ID: D6376 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 9 Ham ST		Amount of Each Disbursement this Period 742.47
City Dover State NH Zip Code 03820	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Ms. Kindl Shinn		Transaction ID: D6386 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 778.46
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Mr. Justin J. Slattery		Transaction ID: D6380 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 4
Mailing Address 63 Keyes Hill Rd		Amount of Each Disbursement this Period 1546.03
City Pelham State NH Zip Code 03076-3240	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3066.96
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Ms. Kathleen Strand Full Name (Last, First, Middle Initial) Mailing Address 2 1/2 Beacon St City Concord State NH Zip Code 03301 Purpose of Disbursement Payroll Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D6384 Date of Disbursement 10 / 01 / 2004 Amount of Each Disbursement this Period 1498.48 Category/Type
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B. Ms. Kristin Tarnstrom Full Name (Last, First, Middle Initial) Mailing Address 2 1/2 Beacon ST City Concord State NH Zip Code 03301 Purpose of Disbursement Payroll Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D8117 Date of Disbursement 10 / 01 / 2004 Amount of Each Disbursement this Period 1309.70 Category/Type
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C. The Campaign Network Full Name (Last, First, Middle Initial) Mailing Address 140 Bayswater St City Boston State MA Zip Code 02128 Purpose of Disbursement Mailing Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D6261 Date of Disbursement 10 / 01 / 2004 Amount of Each Disbursement this Period 10500.00 Category/Type Kerry Fed Exempt Lit & Ma- il
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SUBTOTAL of Disbursements This Page (optional) ▶	13308.18
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. The Campaign Network		Transaction ID: D6262 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 4
Mailing Address 140 Bayswater St		Amount of Each Disbursement this Period 13260.00
City Boston State MA Zip Code 02128	Category/ Type Kerry Fed Exempt Lit & Ma- il	
Purpose of Disbursement Mailing Expenses Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. The Campaign Network		Transaction ID: D6327 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4
Mailing Address 140 Bayswater St		Amount of Each Disbursement this Period 33800.00
City Boston State MA Zip Code 02128	Category/ Type Kerry Fed Exempt Lit & Ma- il	
Purpose of Disbursement Mailing Expenses Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. The Campaign Network		Transaction ID: D6336 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 4
Mailing Address 140 Bayswater St		Amount of Each Disbursement this Period 48480.00
City Boston State MA Zip Code 02128	Category/ Type Kerry Fed Exempt Lit & Ma- il	
Purpose of Disbursement Mailing Expenses Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	95540.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Ms. Amanda Tobey		Transaction ID: D6362 Date of Disbursement 10 / 01 / 2004
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 760.46
City Concord State NH Zip Code 03301	Purpose of Disbursement Payroll Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: D6260 Date of Disbursement 10 / 01 / 2004
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 12600.00
City Manchester State NH Zip Code 03101	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Postage for Kerry Mailers

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: D6285 Date of Disbursement 10 / 05 / 2004
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 370.00
City Manchester State NH Zip Code 03101	Purpose of Disbursement Postage Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Postage for Kerry Mailers

SUBTOTAL of Disbursements This Page (optional) ▶	13730.46
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)

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<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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: D6307 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 650.00
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: D6308 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 2400.00
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: D6309 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 3740.00
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6790.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. U.S. Postmaster		Transaction ID: D6326 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 18331.17
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Transaction ID: D6332 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 8000.00
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Transaction ID: D6349 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 4
Mailing Address 955 Goffs Falls Rd		Amount of Each Disbursement this Period 2590.00
City Manchester State NH Zip Code 03101	Category/ Type Postage for Kerry Mailers	
Purpose of Disbursement Postage		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	28921.17
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 97 / 107

<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

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)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

Full Name (Last, First, Middle Initial) A. Mr. Jesse Wald		Transaction ID: D8116 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon Street		Amount of Each Disbursement this Period 1278.69	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Payroll Expense		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. Ms. Kasia Witkowski		Transaction ID: D6382 Date of Disbursement 10 / 01 / 2004	
Mailing Address PO Box 8		Amount of Each Disbursement this Period 778.47	
City St Regis Falls	State NY	Zip Code 12980	Category/ Type
Purpose of Disbursement Payroll Expenses		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Clark Woolley		Transaction ID: D8114 Date of Disbursement 10 / 01 / 2004	
Mailing Address 2 1/2 Beacon St		Amount of Each Disbursement this Period 983.02	
City Concord	State NH	Zip Code 03301	Category/ Type
Purpose of Disbursement Payroll Expenses		Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3040.18
TOTAL This Period (last page this line number only) ▶	191749.65

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor 1848 Associates	Nature of Debt (Purpose): WMUR debate
Mailing Address 340 Commercial St	
City State ZIP Code Manchester NH 03101-1121	

Outstanding Balance Beginning This Period <input type="text" value="100.00"/>	Transaction ID: D1547	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="100.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press	Nature of Debt (Purpose): sample ballot printing
Mailing Address 26 Roxbury St	
City State ZIP Code Keene NH 03431-3265	

Outstanding Balance Beginning This Period <input type="text" value="1276.41"/>	Transaction ID: D1548	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1276.41"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ariel Press	Nature of Debt (Purpose): sample ballot printing
Mailing Address 26 Roxbury St	
City State ZIP Code Keene NH 03431-3265	

Outstanding Balance Beginning This Period <input type="text" value="1276.41"/>	Transaction ID: D749	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1276.41"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2652.82"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 99 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bannon Research	Nature of Debt (Purpose): polling
Mailing Address 545 Boylston St	
City State ZIP Code Boston MA 02116-3606	

Outstanding Balance Beginning This Period <input type="text" value="2000.00"/>	Transaction ID: D1550	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe	Nature of Debt (Purpose): voter list
Mailing Address 801 Fairfax St	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID: D1551	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Below Tobe	Nature of Debt (Purpose): voter list
Mailing Address 801 Fairfax St	
City State ZIP Code Alexandria VA 22314	

Outstanding Balance Beginning This Period <input type="text" value="3500.00"/>	Transaction ID: D751	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="3500.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9000.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 100 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty	Nature of Debt (Purpose): rent
Mailing Address 922 Elm St	
City State ZIP Code Manchester NH 03101-2017	

Outstanding Balance Beginning This Period <input type="text" value="990.00"/>	Transaction ID: D752	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="990.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bronco Realty	Nature of Debt (Purpose): admin/rent
Mailing Address 922 Elm St	
City State ZIP Code Manchester NH 03101-2017	

Outstanding Balance Beginning This Period <input type="text" value="990.00"/>	Transaction ID: D1552	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="990.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chris Spirou	Nature of Debt (Purpose): travel
Mailing Address 259 Whitford St	
City State ZIP Code Manchester NH 03104-2166	

Outstanding Balance Beginning This Period <input type="text" value="676.55"/>	Transaction ID: D757	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="676.55"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="2656.55"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chris Spirou	Nature of Debt (Purpose): admin/travel
Mailing Address 259 Whitford St	
City State ZIP Code Manchester NH 03104-2166	

Outstanding Balance Beginning This Period 676.55	Transaction ID: D1558	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 676.55

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Federal Express	Nature of Debt (Purpose): admin/mail
Mailing Address PO Box 1140	
City State ZIP Code Memphis TN 38101-1140	

Outstanding Balance Beginning This Period 148.75	Transaction ID: D1554	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 148.75

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor John Durkin	Nature of Debt (Purpose): admin/equipment
Mailing Address 40 Longwood Dr	
City State ZIP Code Keene NH 03431-4505	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: D1553	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

1) SUBTOTALS This Period This Page (optional).....	1825.30
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett	Nature of Debt (Purpose): admin/insurance
Mailing Address 2 Capital Plz	
City State ZIP Code Concord NH 03301-4911	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: D1557	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Morrill & Everett	Nature of Debt (Purpose): insurance
Mailing Address 2 Capital Plz	
City State ZIP Code Concord NH 03301-4911	

Outstanding Balance Beginning This Period 1000.00	Transaction ID: D756	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute	Nature of Debt (Purpose): Health Care Form Reimburse
Mailing Address 1601 NW 114th St	
City State ZIP Code Des Moines IA 50325-7036	

Outstanding Balance Beginning This Period 1700.00	Transaction ID: D1556	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

1) SUBTOTALS This Period This Page (optional).....	▶	3700.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor National Health Policy Institute	Nature of Debt (Purpose): health care forum reimbursement
Mailing Address 1601 NW 114th St	
City State ZIP Code Des Moines IA 50325-7036	

Outstanding Balance Beginning This Period 1700.00	Transaction ID: D755	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1700.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor NH Mailing Services	Nature of Debt (Purpose): 100C Mailing
Mailing Address 7 Perimeter Rd	
City State ZIP Code Manchester NH 03103-3343	

Outstanding Balance Beginning This Period 156.58	Transaction ID: D1555	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 156.58

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor NH Mailing Services	Nature of Debt (Purpose): 100 Club Mailing
Mailing Address 7 Perimeter Rd	
City State ZIP Code Manchester NH 03103-3343	

Outstanding Balance Beginning This Period 156.58	Transaction ID: D754	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 156.58

1) SUBTOTALS This Period This Page (optional).....	2013.16
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney	Nature of Debt (Purpose): reimbursement
Mailing Address 4 Nutt St	
City State ZIP Code Nashua NH 03060-5110	

Outstanding Balance Beginning This Period 2029.51	Transaction ID: D759	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2029.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Russell Verney	Nature of Debt (Purpose): admin/reimbursement
Mailing Address 4 Nutt St	
City State ZIP Code Nashua NH 03060-5110	

Outstanding Balance Beginning This Period 2029.51	Transaction ID: D1560	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2029.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics	Nature of Debt (Purpose): Health Care Forum Invite Design
Mailing Address PO Box 1475	
City State ZIP Code Concord NH 03302-1475	

Outstanding Balance Beginning This Period 119.00	Transaction ID: D1559	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 119.00

1) SUBTOTALS This Period This Page (optional).....	▶	4178.02
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTALS 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 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Star Graphics	Nature of Debt (Purpose): health care forum invite design
Mailing Address PO Box 1475	
City State ZIP Code Concord NH 03302-1475	

Outstanding Balance Beginning This Period <input type="text" value="119.00"/>	Transaction ID: D758	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="119.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV	Nature of Debt (Purpose): debate media hook-up
Mailing Address PO Box 1310	
City State ZIP Code White Riv Jct VT 05001-1310	

Outstanding Balance Beginning This Period <input type="text" value="1665.00"/>	Transaction ID: D760	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1665.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WNNE-TV	Nature of Debt (Purpose): debate media hook-up
Mailing Address PO Box 1310	
City State ZIP Code White Riv Jct VT 05001-1310	

Outstanding Balance Beginning This Period <input type="text" value="1665.00"/>	Transaction ID: D1561	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1665.00"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="3449.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 106 / 107
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
NEW HAMPSHIRE DEMOCRATIC STATE COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation	Nature of Debt (Purpose): admin
Mailing Address 191 Spring St	
City State ZIP Code Lexington MA 02421-8045	

Outstanding Balance Beginning This Period <input type="text" value="91.50"/>	Transaction ID: D761	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="91.50"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Xerox Corporation	Nature of Debt (Purpose): admin - copier service
Mailing Address 191 Spring St	
City State ZIP Code Lexington MA 02421-8045	

Outstanding Balance Beginning This Period <input type="text" value="91.50"/>	Transaction ID: D1562	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="91.50"/>

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="183.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="29657.85"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

Form/Schedule: **F3XA**

Transaction ID:

Please note that the contribution on Schedule A supporting Line 11(b) in the Amended Pre-General Report (10/1-04-10/13/04) filed on 6/5/06 from Gordon and Schwenkmeyer for \$14,080 was not a contribution from a corporation. The \$14,080 from this entity appeared on the report as the result of technical problem created when importing a database of contributions from individuals. The Committee has repaired this problem and these contributions now correctly appear on Schedule A supporting Line 11 (ai).