

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For 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

Johnson for Congress Committee

ADDRESS (number and street)

P. O. Box 1986

Check if different than previously reported. (ACC)

New Britain

CT

06050

2. **FEC IDENTIFICATION NUMBER**

C00145607

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT **NEW (N)** OR **X AMENDED (A)**

CT 05

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

X January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 11 26 2002 through 12 31 2002

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 John Eveleth

Signature of Treasurer Electronically Filed by John Eveleth Date 09 10 2004

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

Office Use Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period: From: M M D D Y Y Y Y To: V M D D Y Y Y Y
1 1 2 8 2 0 0 2 1 2 3 1 2 0 0 2

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a)).....	4150.00	4150.00
(b) Total Contribution Refunds (from Line 20(d)).....	525.00	525.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	3625.00	3625.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	68376.43	183504.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	14992.31	14992.31
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	53384.12	168512.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	104514.55	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period: From: M M D J Y ' ' ' ' 1 1 2 6 2 0 0 2

To: V V U J Y ' ' ' ' 1 2 3 1 2 0 0 2

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	2500.00	
(ii) Unitemized.....	650.00	
(iii) TOTAL of contributions	3150.00	3150.00
from individuals..... ▶		
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	1000.00	1000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	4150.00	4150.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	1273.25
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	14992.31	14992.31
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	13262.62	13262.62
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	32404.93	33678.18

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	68376.43	183504.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	25.00	25.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	525.00	525.00
<hr/>		
21. OTHER DISBURSEMENTS.....	1000.00	3000.00
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) [>]	69901.43	187029.81

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	142011.05
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	32404.93
25. SUBTOTAL (add Line 23 and Line 24).....	174415.98
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69901.43
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	104514.55

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

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

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial) A. Steven Argasy		Date of Receipt M / D / Y 12 / 16 / 2002
Mailing Address 3 Kirbyshire Road		Transaction ID: 083020046C27674
City	State	Zip Code
Avon	CT	06001-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information on Request	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Dennis Manning		Date of Receipt M / D / Y 12 / 16 / 2002
Mailing Address 81 Greenest Ridge Rd.		Transaction ID: 083020046C27675
City	State	Zip Code
Wilton	CT	06897-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Insurance	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Self Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. William Solisburg		Date of Receipt M / D / Y 12 / 16 / 2002
Mailing Address 224 Hinckley Road		Transaction ID: 083020046C27672
City	State	Zip Code
Milton	MA	02188-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Insurance	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Self Election Cycle-to-Date ▼ 1000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial) A. GM PAC		Date of Receipt M / D / Y 12 / 16 / 2002
Mailing Address 300 Renaissance Center P.O. Box 300		Transaction ID: 0830200456C16398
City Detroit	State MI	Zip Code 48265-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer GM PAC	Occupation	Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)41a-1)
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

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

FOR LINE NUMBER: PAGE 7 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial) A. Republican National Commi		Date of Receipt M / D / Y 12 / 31 / 2002
Mailing Address 310 First Street, S.E.		Transaction ID: 083020044C25474
City Washington	State DC	Zip Code 20003-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6611.90
Name of Employer Republican National Commi- tee	Occupation	Offsets to Operating Expe- nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 6611.90	

Full Name (Last, First, Middle Initial) B. SNET/SBC		Date of Receipt M / D / Y 12 / 31 / 2002
Mailing Address P.O.Box 1861		Transaction ID: 0830200459C18927
City New Haven	State CT	Zip Code 06508-0801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3300.00
Name of Employer SNET/SBC	Occupation	Offsets to Operating Expe- nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 3300.00	

Full Name (Last, First, Middle Initial) C. SNET/SBC		Date of Receipt M / D / Y 12 / 31 / 2002
Mailing Address P.O.Box 1861		Transaction ID: 0830200459C18929
City New Haven	State CT	Zip Code 06508-0801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6378.78
Name of Employer SNET/SBC	Occupation	Offsets to Operating Expe- nditu Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 6378.78	

SUBTOTAL of Receipts This Page (optional)	12990.68
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 8 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial) A. SNET/SBC		Date of Receipt
Mailing Address P.O.Box 1861		MM / DD / YYYY 12 / 31 / 2002
City	State	Zip Code
New Haven	CT	06508-0801
FEC ID number of contributing federal political committee. C		Transaction ID: 0830200459C18930
Name of Employer SNET/SBC		Amount of Each Receipt this Period
Occupation		443.37
Receipt For: 2004	Election Cycle-to-Date ▼	Offsets to Operating Expenditure
Primary X General		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Other (specify) ▼	6822.15	

Full Name (Last, First, Middle Initial) B. SNET/SBC		Date of Receipt
Mailing Address P.O.Box 1861		MM / DD / YYYY 12 / 31 / 2002
City	State	Zip Code
New Haven	CT	06508-0801
FEC ID number of contributing federal political committee. C		Transaction ID: 0830200459C18928
Name of Employer SNET/SBC		Amount of Each Receipt this Period
Occupation		1013.56
Receipt For: 2004	Election Cycle-to-Date ▼	Offsets to Operating Expenditure
Primary X General		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Other (specify) ▼	7835.71	

Full Name (Last, First, Middle Initial) C. Yankee Gas		Date of Receipt
Mailing Address P.O. Box 2229		MM / DD / YYYY 12 / 16 / 2002
City	State	Zip Code
Hartford	CT	06145-
FEC ID number of contributing federal political committee. C		Transaction ID: 083020045C28880
Name of Employer Yankee Gas		Amount of Each Receipt this Period
Occupation		183.30
Receipt For: 2004	Election Cycle-to-Date ▼	Offsets to Operating Expenditure
Primary X General		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Other (specify) ▼	183.30	

SUBTOTAL of Receipts This Page (optional)	1640.23
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full) Johnson for Congress Committee	
Full Name (Last, First, Middle Initial) A. Yankee Gas	Date of Receipt M / D / Y U / S / A / Y 12 / 16 / 2002
Mailing Address P.O. Box 2229	Transaction ID: 083020045C26879
City State Zip Code Hartford CT 06145-	Amount of Each Receipt this Period 361.40
FEC ID number of contributing federal political committee. C	Offsets to Operating Expenditure Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Name of Employer Yankee Gas	Occupation
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 544.70

SUBTOTAL of Receipts This Page (optional)	▶	361.40
TOTAL This Period (last page this line number only)	▶	14992.31

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 31

(check only one)

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

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial) A. First City Bank		Date of Receipt M / D / Y 12 / 31 / 2002
Mailing Address 370 West Main Street		Transaction ID: 069020043C24262
City New Britain	State CT	Zip Code 06050-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13262.62
Name of Employer First City Bank	Occupation	Other Receipt Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 13262.62	

SUBTOTAL of Receipts This Page (optional)	▶	13262.62
TOTAL This Period (last page this line number only)	▶	13262.62

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. 200 Main Street LLC

Mailing Address c/o Capstone Properties
1 Court Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement
RENT

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2193
Date of Disbursement
12 / 31 / 2002

Amount of Each Disbursement this Period
2005.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

RENT

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

Mailing Address 324 Hart Street

City New Britain State CT Zip Code 06052-

Purpose of Disbursement
REIMBURSE OFFICE EXPENSES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D808200451E3006
Date of Disbursement
11 / 26 / 2002

Amount of Each Disbursement this Period
826.12

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

REIMBURSE OFFICE EXPENSES

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

Mailing Address 324 Hart Street

City New Britain State CT Zip Code 06052-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D89020048E2237
Date of Disbursement
12 / 18 / 2002

Amount of Each Disbursement this Period
2216.33

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶ **5047.45**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Patrice Adams

Mailing Address 324 Hart Street

City State Zip Code
New Britain CT 06052-

Purpose of Disbursement
OFFICE SUPPLIES/STAFF MEALS/GAS/PAR

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2238
Date of Disbursement

12 / 29 / 2002

Amount of Each Disbursement this Period

1253.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

OFFICE SUPPLIES/STAFF MEALS/GAS/PAR

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

Mailing Address 49 Blue Hills Drive

City State Zip Code
Southington CT 06480-

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1921
Date of Disbursement

12 / 06 / 2002

Amount of Each Disbursement this Period

255.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL EXPENSES

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

Mailing Address P.O. Box 965

City State Zip Code
Danbury CT 06813-

Purpose of Disbursement
PUBLIC RELATIONS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2013
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PUBLIC RELATIONS

SUBTOTAL of Disbursements This Page (optional) ▶

3508.76

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Elizabeth Buell

Mailing Address 634 Tamarack Road

City Cheshire State CT Zip Code 06410-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D83020048E275D
Date of Disbursement
12 / 18 / 2002

Amount of Each Disbursement this Period
1221.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
B. Ms. Lisa Carver

Mailing Address 286 Garry Drive

City New Britain State CT Zip Code 06052-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D83020048E1533
Date of Disbursement
12 / 18 / 2002

Amount of Each Disbursement this Period
425.11

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
C. Ms. Susan Christensen

Mailing Address 5801 Seminary Road

City Falls Church State VA Zip Code 22018-

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General
Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2814
Date of Disbursement
12 / 05 / 2002

Amount of Each Disbursement this Period
376.48

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL EXPENSES

SUBTOTAL of Disbursements This Page (optional) ► **2022.61**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 31

<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Cingular Wireless

Mailing Address P.O. Box 8177

City New Haven State CT Zip Code 06530-

Purpose of Disbursement
PHONE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2368
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

364.72

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PHONE

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

Mailing Address P.O. Box 8177

City New Haven State CT Zip Code 06530-

Purpose of Disbursement
CELL SERVICE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2367
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

224.73

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CELL SERVICE

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

Mailing Address P.O. Box 8048

City New Fairfield State CT Zip Code 06812-

Purpose of Disbursement
ADS

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E1032
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

547.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADS

SUBTOTAL of Disbursements This Page (optional) ▶

1136.70

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. City of New Britain

Mailing Address 27 West Main Street

City State Zip Code
New Britain CT 06051-

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2296
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

135.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PARKING

Full Name (Last, First, Middle Initial)
B. Commissioner of Revenue S

Mailing Address P.O.Box 2931

City State Zip Code
Hartford CT 06104-

Purpose of Disbursement
4TH QUARTER - PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E1015
Date of Disbursement

12 / 13 / 2002

Amount of Each Disbursement this Period

853.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

4TH QUARTER - PAYROLL TAXES

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

Mailing Address P.O.Box 1140

City State Zip Code
Memphis TN 38101-1140

Purpose of Disbursement
EXPRESS MAIL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E855
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

269.55

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EXPRESS MAIL

SUBTOTAL of Disbursements This Page (optional) ▶

1257.73

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement
EXPRESS MAIL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E856

Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

29.43

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

EXPRESS MAIL

Full Name (Last, First, Middle Initial)

B. Mr. Cameron Hemmerdinger

Mailing Address 4 Forest Drive

City Westport State CT Zip Code 06880-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2581

Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1221.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

C. Heritage Villager

Mailing Address P.O. Box 269

City Southbury State CT Zip Code 06448-

Purpose of Disbursement
ADS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2743

Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

236.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADS

SUBTOTAL of Disbursements This Page (optional) ▶

1486.44

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City State Zip Code
Canton CT 06019-

Purpose of Disbursement
BONUS

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020047E98
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

777.04

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BONUS

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

Mailing Address 65 Bank Street

City State Zip Code
New Milford CT 06776-

Purpose of Disbursement
ADS

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020048E1588
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

894.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADS

Full Name (Last, First, Middle Initial)
C. Internal Revenue Service

Mailing Address Main Street

City State Zip Code
Hartford CT 06105-

Purpose of Disbursement
941 FOURTH QTR

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020048E1719
Date of Disbursement

12 / 13 / 2002

Amount of Each Disbursement this Period

8967.16

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

941 FOURTH QTR

SUBTOTAL of Disbursements This Page (optional) ▶

10638.20

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton State NJ Zip Code 08540-

Purpose of Disbursement
MEDIA

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E987
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

13580.45

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEDIA

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

Mailing Address 5 Mapleton Avenue

City Princeton State NJ Zip Code 08540-

Purpose of Disbursement
XMAS CARDS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E988
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

2963.51

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

XMAS CARDS

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

Mailing Address B24 Farmington Avenue

City West Hartford State CT Zip Code 06107-

Purpose of Disbursement
ADS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1598
Date of Disbursement

12 / 25 / 2002

Amount of Each Disbursement this Period

312.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADS

SUBTOTAL of Disbursements This Page (optional) ▶

16855.97

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Ms. Aimee Malenfant

Mailing Address 206 Riverside Street

City State Zip Code
Oakville CT 06779-

Purpose of Disbursement
BONUS

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020048E2441
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

780.18

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BONUS

Full Name (Last, First, Middle Initial)
B. Mr. Steven Markowski

Mailing Address 27 Oak Street

City State Zip Code
Meriden CT 06450-

Purpose of Disbursement
GAS

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020048E2840
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

23.55

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

GAS

Full Name (Last, First, Middle Initial)
C. Mr. Steven Markowski

Mailing Address 27 Oak Street

City State Zip Code
Meriden CT 06450-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify) ▼
State:	District		

Category/
Type

Transaction ID: D83020048E2841
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1385.51

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

SUBTOTAL of Disbursements This Page (optional) ▶

2169.24

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)
Mr. Steven Markowski

Mailing Address 27 Oak Street

City Meriden State CT Zip Code 06450-

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020048E2842
Date of Disbursement
12 / 31 / 2002

Amount of Each Disbursement this Period
0.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

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

Mailing Address P.O.Box 85853

City Louisville State KY Zip Code 40285-5053

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020047E483
Date of Disbursement
12 / 31 / 2002

Amount of Each Disbursement this Period
18.25

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

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

Mailing Address P.O.Box 85853

City Louisville State KY Zip Code 40285-5053

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020047E482
Date of Disbursement
12 / 31 / 2002

Amount of Each Disbursement this Period
283.23

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶ **281.48**

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Ms. Deena Miller

Mailing Address 100 Clock Shop Drive

City Berlin State CT Zip Code 06037-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2523
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1934.69

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
B. Mr. John Miller

Mailing Address 45 Blue Ridge Drive

City Weatogue State CT Zip Code 06080-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2819
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1221.01

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
C. Morgan, Meredith & Associ

Mailing Address 4451 Brookfield Corp. Drive

City Chantilly State VA Zip Code 20151-

Purpose of Disbursement
FUNDRAISING

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E555
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

3000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FUNDRAISING

SUBTOTAL of Disbursements This Page (optional) ▶

6155.70

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Morrell Phillips & Co.

Mailing Address 1253 Wilbur Cross Parkway

City Berlin State CT Zip Code 06037-

Purpose of Disbursement
ACCOUNTING FEES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020047E705
Date of Disbursement
12 / 16 / 2002

Amount of Each Disbursement this Period
125.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ACCOUNTING FEES

Full Name (Last, First, Middle Initial)
B. New Britain Republican To

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement
MAILING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020048E2837
Date of Disbursement
12 / 31 / 2002

Amount of Each Disbursement this Period
868.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MAILING EXPENSE

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

Mailing Address P.O. Box 2980

City Hartford State CT Zip Code 06104-2980

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/ Type

Transaction ID: D83020047E1394
Date of Disbursement
12 / 15 / 2002

Amount of Each Disbursement this Period
30.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

UTILITIES

SUBTOTAL of Disbursements This Page (optional) ► **1023.09**

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Northeast Utilities

Mailing Address P.O.Box 2980

City Hartford State CT Zip Code 06104-2980

Purpose of Disbursement
UTILITIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E1395
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

450.31

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

UTILITIES

Full Name (Last, First, Middle Initial)
B. Mr. Paul OSullivan

Mailing Address 162 Lasalle Road

City West Hartford State CT Zip Code 06107-

Purpose of Disbursement
BONUS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2480
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

796.82

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BONUS

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

Mailing Address P.O. Box 1B055

City Bridgeport State CT Zip Code 06801-

Purpose of Disbursement
NEWSPAPER ADS/GAS/SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1988
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

2804.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

NEWSPAPER ADS/GAS/SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

3851.89

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 24 / 31

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Peoples Bank

Mailing Address P.O. Box 18055

City State Zip Code
Bridgeport CT 06601-

Purpose of Disbursement
MEALS/GAS/SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1985
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

2487.62

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS/GAS/SUPPLIES

Full Name (Last, First, Middle Initial)

B. Petty Cash

Mailing Address 212 Main Street

City State Zip Code
New Britain CT 06050-

Purpose of Disbursement
MEALS/GAS/POSTAGE/SUPPLIES

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E117B
Date of Disbursement

12 / 02 / 2002

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

MEALS/GAS/POSTAGE/SUPPLIES

Full Name (Last, First, Middle Initial)

C. Potomac Design

Mailing Address 4917 N 35th Street

City State Zip Code
Arlington VA 22207-

Purpose of Disbursement
WEB SITE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1890
Date of Disbursement

12 / 06 / 2002

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

WEB SITE

SUBTOTAL of Disbursements This Page (optional) ▶

5237.62

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

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

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Ms. Winifred Rohrbaugh

Mailing Address 137 Harding Street

City State Zip Code
New Britain CT 06052-

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E131
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1217.84

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)
B. Mr. Brian Schubert

Mailing Address 1515 State Street

City State Zip Code
New Haven CT 06511-

Purpose of Disbursement
BONUS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2496
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

768.99

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BONUS

Full Name (Last, First, Middle Initial)
C. SNET/SBC

Mailing Address P.O. Box 1861

City State Zip Code
New Haven CT 06508-0901

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020047E976
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

976.12

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶

2962.95

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

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

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. The Register Citizen

Mailing Address 190 Water Street

City Torrington State CT Zip Code 06790-

Purpose of Disbursement
ADS

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2771
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

777.16

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

ADS

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

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement
POSTAGE

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E1793
Date of Disbursement

12 / 18 / 2002

Amount of Each Disbursement this Period

1086.76

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

POSTAGE

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

Mailing Address P.O. Box 1310

City Burlington State CT Zip Code 06013-

Purpose of Disbursement
AD

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2838
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

530.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

AD

SUBTOTAL of Disbursements This Page (optional) ▶

2393.92

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

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

Use separate schedule(s)
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Detailed Summary Page

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Alisha Wallenstein

Mailing Address 1505 Autumn Ridge Circle

City Reston State VA Zip Code 20194-

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2792
Date of Disbursement

12 / 02 / 2002

Amount of Each Disbursement this Period

152.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL EXPENSES

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

Mailing Address 817 Totoket Road

City Northford State CT Zip Code 06477-

Purpose of Disbursement
TRAVEL EXPENSES

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E1932
Date of Disbursement

12 / 05 / 2002

Amount of Each Disbursement this Period

283.70

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

TRAVEL EXPENSES

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

Mailing Address 35 Hooker Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement
CLEANING

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Transaction ID: D83020048E2776
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

200.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

CLEANING

SUBTOTAL of Disbursements This Page (optional) ▶

635.70

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

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

Use separate schedule(s)
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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Xcel Image, Inc.

Mailing Address 1155 Silas Deane Highway

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement
COPIER

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E2219
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

349.80

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

COPIER

Full Name (Last, First, Middle Initial)

B. Xpedite Systems

Mailing Address P.O. Box 14024

City Eatontown State NJ Zip Code 07724-

Purpose of Disbursement
FAX/EMAIL SERVICE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1847
Date of Disbursement

12 / 15 / 2002

Amount of Each Disbursement this Period

128.04

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

FAX/EMAIL SERVICE

Full Name (Last, First, Middle Initial)

C. Xpedite Systems

Mailing Address P.O. Box 14024

City Eatontown State NJ Zip Code 07724-

Purpose of Disbursement
BATCH FAX/E-MAILS

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District

Category/
Type

Transaction ID: D83020048E1848
Date of Disbursement

12 / 31 / 2002

Amount of Each Disbursement this Period

521.10

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

BATCH FAX/E-MAILS

SUBTOTAL of Disbursements This Page (optional) ▶

998.94

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

67664.39

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

Use separate schedule(s)
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Detailed Summary Page

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input checked="" type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Suzanne Terrell

Mailing Address 6554 Florida Boulevard

City Baton Rouge State LA Zip Code 70806-

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate Disbursement For: 2004 Primary General
X Other (specify) ▼

State: District GENERAL 2002

Transaction ID: D53020048E2813
Date of Disbursement

12 / 02 / 2002

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1000.00

TOTAL This Period (last page this line number only) ▶ 1000.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input checked="" type="checkbox"/>	20b	<input checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)
A. Oral & Maxillofacial Surgery PAC

Mailing Address 9700 W. Bryn Mawr Ave.

City State Zip Code
Rosemont IL 60018-

Purpose of Disbursement
Refund of Contribution refund of PAC con

Candidate Name

Office Sought: House Senate
Disbursement For: 2004
X Primary General
Other (specify) ▼

State: District

Transaction ID: D908200451E30D4
Date of Disbursement

12 / 02 / 2002

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

010
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

500.00

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

500.00

