

**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

Friends of Patrick J. Kennedy Inc.

ADDRESS (number and street)

P.O. Box 321

☐Check if different
than previously
reported. (ACC)

Pawtucket

RI

02860

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00326140

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

RI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

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

10

01

2005

through

12

31

2005

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

William San Bento, Jr.

Signature of Treasurer

Electronically Filed by William San Bento, Jr.

Date

03

23

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.

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

Friends of Patrick J. Kennedy Inc.

Report Covering the Period:

From:

M M
1 0D D
0 1Y Y Y Y
2 0 0 5

To:

M M
1 2D D
3 1Y Y Y Y
2 0 0 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	100450.00	747556.70
(b) Total Contribution Refunds (from Line 20(d)).....	1500.00	6300.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	98950.00	741256.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	126530.23	578981.97
(b) Total Offsets to Operating Expenditures (from Line 14).....	1076.41	4259.05
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	125453.82	574722.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1015540.79	
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

Friends of Patrick J. Kennedy Inc.

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

(i) Itemized (use Schedule A).....

60200.00

542980.00

(ii) Unitemized.....

5500.00

18861.00

(iii) TOTAL of contributions

65700.00

561841.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees
(such as PACS).....

34750.00

185715.70

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS
(other than loans)

100450.00

747556.70

(add Lines 11(a)(iii), (b), (c), and (d))

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

35990.08

60990.08

13. LOANS

(a) Made or Guaranteed by the
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

(add Lines 13(a) and (b)).....

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

1076.41

4259.05

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

5413.36

14511.39

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

142929.85

827317.22

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.....	126530.23	578981.97
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	825.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	1500.00	5400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	900.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1500.00	6300.00
21. OTHER DISBURSEMENTS.....	24910.00	89850.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ➤	152940.23	675956.97

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1025551.17
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	142929.85
25. SUBTOTAL (add Line 23 and Line 24).....	1168481.02
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	152940.23
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1015540.79

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate Patrick J. Kennedy		Candidate ID Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">H4RI01034</div>
Name of Principal Campaign Committee Friends of Patrick J. Kennedy Inc.		Committee ID Number <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00326140</div>
Committee Address P.O. Box 321		
City Pawtucket	State RI	ZIP 02860
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	<div style="border: 1px solid black; padding: 2px; display: inline-block;">717317.22</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">110000.00</div>
2. Aggregate amount of contributions from personal funds of the candidate	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
3. Gross receipts minus the candidate's personal contributions	<div style="border: 1px solid black; padding: 2px; display: inline-block;">717317.22</div>	<div style="border: 1px solid black; padding: 2px; display: inline-block;">110000.00</div>

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

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

FOR LINE NUMBER: PAGE 6 / 170

(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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Justine Ambrico Mailing Address 19317 Tattershall Dr. City State Zip Code Germantown MD 20874 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5 Transaction ID: C23601 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Justine Ambrico Mailing Address 19317 Tattershall Dr. City State Zip Code Germantown MD 20874 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5 Transaction ID: C23600 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Nathan J. Bachrach Mailing Address 4367 Chidester Ln. City State Zip Code Cincinnati OH 45241 FEC ID number of contributing federal political committee. C Name of Employer Occupation Financial Network Group Ltd CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 0 / 2 0 0 5 Transaction ID: C23621 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4450.00

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 7 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Samuel Brickle

Mailing Address P.O. Box 309

City State Zip Code
Woonsocket RI 02895

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hyman Brickle & Son

Occupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23459

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Stephen A. Cardi, II

Mailing Address 45 Burns Way

City State Zip Code
East Greenwich RI 02818

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cardi Corporation

Occupation
Executive Vice President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23464

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Patrick T. Conley

Mailing Address 1445 Wampanoag Trail
Suite 203

City State Zip Code
East Providence RI 02915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23477

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 8 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Elizabeth I. Crown

Mailing Address 332 Eaton Ln.

City State Zip Code
 Northfield IL 60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23619

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Patricia Crown

Mailing Address 5 Polo Club Dr.

City State Zip Code
 Denver CO 80209

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Psychotherapist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23617

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Judith Crown Craver

Mailing Address 9 Brigham Rd.

City State Zip Code
 Lexington MA 02420

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Clinical Psychologist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23618

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

William J. Fischer

Mailing Address 134 Arlington Ave.

City State Zip Code
 Providence RI 02906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vision Strategies LLC

Occupation
Owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23483

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Charles S. Fradin

Mailing Address P.O. Box 1427

City State Zip Code
 Coventry RI 02816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Copley Distributors

Occupation
Owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23448

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Antoine E. Gharios

Mailing Address 55 Timber Ridge Dr.

City State Zip Code
 Pawcatuck CT 06379

FEC ID number of contributing
federal political committee.

C

Name of Employer
Purvis Systems

Occupation
Director, Govt. Affairs

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23482

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2400.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Antoine E. Gharios

Mailing Address 55 Timber Ridge Dr.

City State Zip Code
Pawcatuck CT 06379

FEC ID number of contributing
federal political committee.

C

Name of Employer
Purvis Systems

Occupation
Director, Govt. Affairs

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23481

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Nancy J. Gomez

Mailing Address P.O. Box 67136

City State Zip Code
Scotts Valley CA 95067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 5

Transaction ID: C23432

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Carol B. Goodman

Mailing Address 3650 Herschel Ave.

City State Zip Code
Cincinnati OH 45208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Morgan Stanley

Occupation
Director

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23630

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

900.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) John Gregory Mailing Address 58 Church St. P.O. Box 562 City Slatersville State RI Zip Code 02876 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5 Transaction ID: C23453 Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) P. Davis Guggenheim Mailing Address 73 Market St. City Venice State CA Zip Code 90291 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 5 Transaction ID: C23415 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Chris Hoban Mailing Address 201 S. Narcissus Ave. Apt. PH3 City West Palm Beach State FL Zip Code 33401 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5 Transaction ID: C23607 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1150.00

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 12 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Michael P. Hoban Mailing Address 201 S. Narcissus Ave. Apt. PH3 City State Zip Code West Palm Beach FL 33401 FEC ID number of contributing federal political committee. C Name of Employer 3E Technologies Intl Occupation Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5 Transaction ID: C23606 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Alan P. Hogan Mailing Address 661 E. 9th St. City State Zip Code Indianapolis IN 46202 FEC ID number of contributing federal political committee. C Name of Employer Hogan Group Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5 Transaction ID: C23429 Amount of Each Receipt this Period 1500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Alan P. Hogan Mailing Address 661 E. 9th St. City State Zip Code Indianapolis IN 46202 FEC ID number of contributing federal political committee. C Name of Employer Hogan Group Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 2 / 2 0 0 5 Transaction ID: C23597 Amount of Each Receipt this Period 600.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**4100.00****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 13 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Paul V. Jabour

Mailing Address 343 Broadway

City State Zip Code
 Providence RI 02909

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23460

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Paige L. Jansen

Mailing Address 1201 Ivy Brook Ln.

City State Zip Code
 Atlanta GA 30319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jansen Advertising, Inc.

Occupation
President

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23603

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Paige L. Jansen

Mailing Address 1201 Ivy Brook Ln.

City State Zip Code
 Atlanta GA 30319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jansen Advertising, Inc.

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23602

Amount of Each Receipt this Period

1100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4200.00

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 14 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Stanley M. Kaplan

Mailing Address 7216 Willowbrook Ln.

City State Zip Code
 Cincinnati OH 45237

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23634

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Lilo Leeds

Mailing Address 17 Hilltop Dr. West

City State Zip Code
 Great Neck NY 11021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 5

Transaction ID: C23615

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Anthony Marandola

Mailing Address 24 Minnesota Ave.

City State Zip Code
 Warwick RI 02888

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marandola Plumbing & Heat-
ing Co.

Occupation
Mechanical Contractor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23440

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 15 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Ralph M. Mariano

Mailing Address P.O. Box 4736

City State Zip Code
 Middletown RI 02842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dept. of Defense

Occupation
Engineer

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23480

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Louis Marx, Jr.

Mailing Address 712 5th Ave. 8th Fl.

City State Zip Code
 Manhattan NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Noel Group

Occupation
Chairman

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23596

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Louis Marx, Jr.

Mailing Address 712 5th Ave. 8th Fl.

City State Zip Code
 Manhattan NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Noel Group

Occupation
Chairman

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23595

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4700.00

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 16 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. William H. May

Mailing Address 142 South Creek

City State Zip Code
 Frankfort KY 40601

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hurt, Crosby & May

Occupation
Attorney

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23638

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Frederic H. Mayerson

Mailing Address 312 Walnut St.
Suite 1151

City State Zip Code
 Cincinnati OH 45202

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Wal

Occupation
Chairman

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23633

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Charles E. Maynard

Mailing Address 35 Hilltop Dr.

City State Zip Code
 East Greenwich RI 02818

FEC ID number of contributing
federal political committee.

C

Name of Employer
Providence Center

Occupation
President/CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23458

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

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 17 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

James M. McWeeney

Mailing Address 520 McClure Rd.

City State Zip Code
 Lebanon OH 45036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 3 / 2 0 0 5

Transaction ID: C23423

Amount of Each Receipt this Period

-2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Returned check prior peri-
od

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

James M. McWeeney

Mailing Address 520 McClure Rd.

City State Zip Code
 Lebanon OH 45036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 7 / 2 0 0 5

Transaction ID: C23424

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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

Robert F. Muhlhauser, Jr.

Mailing Address 8775 Spooky Hollow Rd.

City State Zip Code
 Cincinnati OH 45242

FEC ID number of contributing
federal political committee.

C

Name of Employer
Precision Temp Inc.

Occupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23635

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 18 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
 Ronald G. Murdock
 Mailing Address 259 Rolling Hill Rd.

City State Zip Code
 Portsmouth RI 02871

FEC ID number of contributing
federal political committee.

C

Name of Employer
Progeny Systems

Occupation
Engineer

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23478

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
 Arlene Myers Morris
 Mailing Address 849 Valparaiso Ave.

City State Zip Code
 Menlo Park CA 94025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Affymax

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 0 5

Transaction ID: C23430

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
 Mary E. ORourke

Mailing Address 150 Midway Rd.
 Suite 157

City State Zip Code
 Cranston RI 02920

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASFT

Occupation
Government Relations

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23472

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

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 19 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Stacy Paterno

Mailing Address 65 New Meadow Rd.

City State Zip Code
 Barrington RI 02806

FEC ID number of contributing
federal political committee.

C

Name of Employer
Clarendon Group

Occupation
Project Manager

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23470

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Claiborne Pell

Mailing Address 45 Ledge Rd.

City State Zip Code
 Newport RI 02840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23452

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Marcia S. Riesman

Mailing Address 245 Waterman St.
Suite 402

City State Zip Code
 Providence RI 02906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23450

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1100.00

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 20 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Anthony Sances, Jr.

Mailing Address 3202 Campanil Dr.

City State Zip Code
 Santa Barbara CA 93109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Professor

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23610

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Anthony Sances, Jr.

Mailing Address 3202 Campanil Dr.

City State Zip Code
 Santa Barbara CA 93109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Professor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23609

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Mary Sances

Mailing Address 3202 Campanil Dr.

City State Zip Code
 Santa Barbara CA 93109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Administrative Assistant

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23611

Amount of Each Receipt this Period

800.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 21 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Michael E. Schwartz

Mailing Address 485 Poppasquash Rd.

City State Zip Code
 Bristol RI 02809

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Radio Station owner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23463

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. J. Robin Sinclair

Mailing Address 1858 William Howard Taft Rd.

City State Zip Code
 Cincinnati OH 45206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23637

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Nathaniel G. Smith

Mailing Address 97 West Maple Ave.

City State Zip Code
 Fort Mitchell KY 41011

FEC ID number of contributing
federal political committee.

C

Name of Employer
SSK Communities

Occupation
Partner

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23631

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 22 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Walter S. Smitson
Mailing Address 2409 Grandin Rd.

City State Zip Code
Cincinnati OH 45208

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Cincinnati

Occupation
Psychologist

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23628

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Joseph R. Smyjunas, Jr.
Mailing Address 9064 Ridgeway Close

City State Zip Code
Cincinnati OH 45236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Grall Associates

Occupation
Real Estate

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23640

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Kenneth E. Stalder
Mailing Address 19317 Tattershall Dr.

City State Zip Code
Germantown MD 20874

FEC ID number of contributing
federal political committee.

C

Name of Employer
KSA Consulting

Occupation
CEO

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: C23598

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2850.00

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 23 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Kenneth E. Stalder
Mailing Address 19317 Tattershall Dr.

City State Zip Code
Germantown MD 20874

FEC ID number of contributing
federal political committee.

C

Name of Employer
KSA Consulting

Occupation
CEO

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: C23599

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Nina A. Straight
Mailing Address 1140 23rd St. NW
Apt. 1008

City State Zip Code
Washington DC 20037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Journalist

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: C23431

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Craig P. Taylor
Mailing Address 476 Terrington Dr.

City State Zip Code
Ballwin MO 63021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dirt Cheap

Occupation
Vice President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: C23409

Amount of Each Receipt this Period

1900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 24 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
 Craig P. Taylor
 Mailing Address 476 Terrington Dr.

City State Zip Code
 Ballwin MO 63021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dirt Cheap

Occupation
Vice President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 4000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23408

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
 Richard A. Weiland
 Mailing Address 2444 Madison Rd.

City State Zip Code
 Cincinnati OH 45208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Richard Consulting Corp.

Occupation
Consultant

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 3 0 / 2 0 0 5

Transaction ID: C23639

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
 Richard I. Weiss
 Mailing Address 106 Canfield Hill Dr.

City State Zip Code
 Gaithersburg MD 20878

FEC ID number of contributing
federal political committee.

C

Name of Employer
KSA Consulting

Occupation
President

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 2 / 1 2 / 2 0 0 5

Transaction ID: C23604

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2700.00

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 25 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Richard I. Weiss
Mailing Address 106 Canfield Hill Dr.

City State Zip Code
Gaithersburg MD 20878

FEC ID number of contributing
federal political committee.

C

Name of Employer
KSA Consulting

Occupation
President

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: C23605

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sheldon Whitehouse
Mailing Address 32 Elm Grove Ave.

City State Zip Code
Providence RI 02906

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23476

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John H. Wyant
Mailing Address 2337 Grandin Rd.

City State Zip Code
Cincinnati OH 45208

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blue Chip Venture Co.

Occupation
Managing Director

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23632

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

60200.00

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

FOR LINE NUMBER: PAGE 26 / 170

(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)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. A. Ralph Mollis Campaign Account

Mailing Address 3 Dodge St.

City	State	Zip Code
North Providence	RI	02904

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

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Transaction ID: C23467

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)Funds Permissible Under
the Act

Full Name (Last, First, Middle Initial)

B. AFGE PAC

Mailing Address 80 F St., NW

City	State	Zip Code
Washington	DC	20001

FEC ID number of contributing
federal political committee.**C** C00009936

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	5

Transaction ID: C23425

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. American Bankers Association

Mailing Address 1120 Connecticut Ave., NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing
federal political committee.**C** C00004275

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Transaction ID: C23461

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional)

3150.00

TOTAL This Period (last page this line number only)

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

FOR LINE NUMBER: PAGE 27 / 170

(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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Anteon PAC Mailing Address 3211 Jermantown Rd. Suite 700 City Fairfax State VA Zip Code 22030 FEC ID number of contributing federal political committee. C C00337204 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C23428 Amount of Each Receipt this Period <div style="border: 1px solid black; text-align: right; padding: 2px;">500.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	5												
B. Full Name (Last, First, Middle Initial) Bank of America Corporation Federal PAC Mailing Address 100 N. Tryon St. City Charlotte State NC Zip Code 28255 FEC ID number of contributing federal political committee. C C00364778 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C23616 Amount of Each Receipt this Period <div style="border: 1px solid black; text-align: right; padding: 2px;">2000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		3	1		2	0	0	5												
C. Full Name (Last, First, Middle Initial) Boilermakers-Blacksmiths LEAP Mailing Address 753 State Avenue Suite # 565 City Kansas City State KS Zip Code 66101 FEC ID number of contributing federal political committee. C C00005157 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table> Transaction ID: C23608 Amount of Each Receipt this Period <div style="border: 1px solid black; text-align: right; padding: 2px;">2500.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	0	5												
SUBTOTAL of Receipts This Page (optional) ►																					
TOTAL This Period (last page this line number only) ►																					

5000.00

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

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

FOR LINE NUMBER: PAGE 28 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Citizens Financial Group Inc. PAC

Mailing Address One Citizens Plaza

City State Zip Code
 Providence RI 02903

FEC ID number of contributing
federal political committee. **C** C00307249

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23436

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. CVS Corporation Federal PAC

Mailing Address One CVS Dr.

City State Zip Code
 Woonsocket RI 02895

FEC ID number of contributing
federal political committee. **C** C00327916

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23434

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. DRS Technologies

Mailing Address Good Government Fund
 3201 New Mexico Ave. NW #350

City State Zip Code
 Washington DC 20016

FEC ID number of contributing
federal political committee. **C** C00275123

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 0 1 / 2 0 0 5

Transaction ID: C23495

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 29 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Friends of Dan Issa

Mailing Address 1 Hastings Ave.

City State Zip Code
Pawtucket RI 02861

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23437

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Funds Permissible Under
the Act

B. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary Political Contribution Plan

Mailing Address 3190 Fairview Park Dr.

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing
federal political committee.

C

C00078451

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23492

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
General Dynamics Voluntary Political Contribution Plan

Mailing Address 3190 Fairview Park Dr.

City State Zip Code
Falls Church VA 22042

FEC ID number of contributing
federal political committee.

C

C00078451

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23493

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 30 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Greater Cincinnati Northern KY Apt. Assn. PAC 739

Mailing Address 525 W. Fifth St. #233

City State Zip Code
Covington KY 41011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23620

Amount of Each Receipt this Period

50.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Funds Permissible Under
the Act

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

Guillaume De Ramel 2006

Mailing Address 29 Howard St.

City State Zip Code
Newport RI 02840

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23468

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Funds Permissible Under
the Act

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

International Union of Operating Engineers PAC

Mailing Address 1125 17th St. NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C

C00029504

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: C23419

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2050.00

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 31 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Motorola PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 5
Mailing Address 1350 I St. NW Suite 400		Transaction ID: C23427
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00075341		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) National Grid USA PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 25 Research Dr.		Transaction ID: C23497
City Westborough State MA Zip Code 01582	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00048702		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Nixon Peabody LLP PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address Clinton Sq. P.O. Box 31051		Transaction ID: C23465
City Rochester State NY Zip Code 14603	Amount of Each Receipt this Period 750.00	
FEC ID number of contributing federal political committee. C C00404178		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)

3750.00

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 32 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Providence Lodge 3 Fraternal Order of Police

Mailing Address State PAC
40 Sheridan St.

City State Zip Code
Providence RI 02909

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23439

Amount of Each Receipt this Period

150.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Funds Permissible Under
the Act

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

Mailing Address 430 N. Michigan Ave.

City State Zip Code
Chicago IL 60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23466

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Rolls-Royce North America PAC

Mailing Address 14850 Conference Center Dr.
Suite 100

City State Zip Code
Chantilly VA 20151

FEC ID number of contributing
federal political committee.

C C00296822

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: C23426

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4150.00

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 33 / 170

(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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) SEIU COPE Mailing Address 1313 L St., NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. C C00004036 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00	Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 5 Transaction ID: C23613 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) Textron, Inc. PAC Mailing Address P. O. Box 878 40 Westminster St. City Providence State RI Zip Code 02901 FEC ID number of contributing federal political committee. C C00123612 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5 Transaction ID: C23411 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) UAW V CAP Mailing Address 8000 E. Jefferson City Detroit State MI Zip Code 48214 FEC ID number of contributing federal political committee. C C00002840 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5 Transaction ID: C23407 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)**4000.00****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 34 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
United Assoc. Political Education Comm.

Mailing Address 901 Massachussetts Ave., NW

City State Zip Code
Washington DC 20001
FEC ID number of contributing
federal political committee.**C** C00012476

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 0 / 2 0 0 5

Transaction ID: C23636

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 Glenlake Parkway, N.E.

City State Zip Code
Atlanta GA 30328
FEC ID number of contributing
federal political committee.**C** C00064766

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 1 / 2 0 0 5

Transaction ID: C23491

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial)
Verizon Communications Good Govt. PAC

Mailing Address 1717 Arch St. 47-S

City State Zip Code
Philadelphia PA 19103
FEC ID number of contributing
federal political committee.**C** C00186288

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 0 5

Transaction ID: C23422

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

34750.00

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

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

FOR LINE NUMBER: PAGE 35 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Kennedy-Kennedy Committee
Mailing Address 301 4th St. NE Suite 202

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00411678

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
60990.08

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 5

Transaction ID: C23420

Amount of Each Receipt this Period

825.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Reimburse start up costs transfer

B. Full Name (Last, First, Middle Initial)
Kennedy-Kennedy Committee
Mailing Address 301 4th St. NE Suite 202

City State Zip Code
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00411678

Name of Employer Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
60990.08

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 5

Transaction ID: C23498

Amount of Each Receipt this Period

35165.08

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Joint Fundraiser

C. Full Name (Last, First, Middle Initial)
Alan Ades
Mailing Address c/o Organogenesis Inc.
150 Dan Rd.

City State Zip Code
Canton MA 02021

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

Name of Employer Occupation
Organogenesis Inc. Co-Chairman

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: C23499

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

35990.08

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 36 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. AGSHF Civic Action Committee

Mailing Address 1333 New Hampshire Ave. NW
Suite 400

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00104901

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: C23500

Amount of Each Receipt this Period

375.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Agua Caliente Band of Cahuilla Indians

Mailing Address 600 East Tahquitz Way

City State Zip Code
Palm Springs CA 92262

FEC ID number of contributing
federal political committee.

C

Name of Employer
Funds Permissible Under
the Act

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: C23501

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Alexander R. Baldwin, III

Mailing Address c/o Stephen Smith & Co.
509 Madison Ave. 15th Fl.

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Actor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 5

Transaction ID: C23502

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 37 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Robert Batinovich
Mailing Address 441 Roehampton Rd.

City State Zip Code
Hillsborough CA 94010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 6 / 2 0 0 5

Transaction ID: C23503

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

B. Full Name (Last, First, Middle Initial)
Thomas Beckwith
Mailing Address 5728 Oakhurst Dr.

City State Zip Code
Seminole FL 33772

FEC ID number of contributing
federal political committee.

C

Name of Employer
Beckwith Electric Co.

Occupation

President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 5

Transaction ID: C23504

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

C. Full Name (Last, First, Middle Initial)
Susan M. Bentley
Mailing Address 3 Casa Loma Way

City State Zip Code
Lakeland FL 33813

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: C23506

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 38 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Jane Bidwell Mailing Address 140 W. Crescent Ave. City Mahwah State NJ Zip Code 07430 FEC ID number of contributing federal political committee. C Name of Employer Self-employed Occupation Social Worker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 5 Transaction ID: C23507 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) John D. Bixler Mailing Address 227 Franklin St. City Johnstown State PA Zip Code 15901 FEC ID number of contributing federal political committee. C Name of Employer Children's Paraclete Occupation Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 5 Transaction ID: C23508 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Brotherhood of Railroad Signalmen's PAC Mailing Address 917 Shenandoah Shores Rd. City Front Royal State VA Zip Code 22630 FEC ID number of contributing federal political committee. C C00011262 Name of Employer Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 5 Transaction ID: C23509 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 39 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Building & Construction Trades Dept.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address Federal PEF 815 16th Street, NW Room 603		Transaction ID: C23553
City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C C00003160		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

B. Full Name (Last, First, Middle Initial) Denis Cashman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5
Mailing Address 53 North Mill St.		Transaction ID: C23510
City Hopkinton State MA Zip Code 01748	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Name of Employer EMC Corporation	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Alfred Cohen		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 102 Courtside Dr.		Transaction ID: C23511
City Naples State FL Zip Code 34105	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Name of Employer	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

0.00

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 40 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Arnold Cohen

Mailing Address 500 Bayview Dr.

City State Zip Code
 Sunny Isles FL 33160

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 6 / 2 0 0 5

Transaction ID: C23580

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. College of American Pathologists PAC

Mailing Address 1350 I St. NW Suite 590

City State Zip Code
 Washington DC 20005

FEC ID number of contributing federal political committee.

C

C00274944

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 6 / 2 0 0 5

Transaction ID: C23512

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Kimberly Dacier

Mailing Address 92 Woodland St.

City State Zip Code
 Sherborn MA 01770

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23513

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 41 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Robert D. Dockendorff
Mailing Address 260 Amber Drive

City State Zip Code
San Francisco CA 94131

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 0 5

Transaction ID: C23515

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

B. Full Name (Last, First, Middle Initial)
David Donatelli
Mailing Address 31 Brookfield Rd.

City State Zip Code
Dover MA 02030

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC

Occupation

Executive VP

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: C23516

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

C. Full Name (Last, First, Middle Initial)
Howard Elias
Mailing Address 137 Lake St.

City State Zip Code
Sherborn MA 01770

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC

Occupation

Executive VP

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: C23517

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 42 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Albert Erani

Mailing Address 1000 Huyler St.

City	State	Zip Code
Teterboro	NJ	07608

FEC ID number of contributing
federal political committee.**C**Name of Employer
OrganogenesisOccupation
Board of Directors

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	0 7	/	2 0 0 5

Transaction ID: C23582

Amount of Each Receipt this Period

1900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Albert Erani

Mailing Address 1000 Huyler St.

City	State	Zip Code
Teterboro	NJ	07608

FEC ID number of contributing
federal political committee.**C**Name of Employer
OrganogenesisOccupation
Board of Directors

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	0 7	/	2 0 0 5

Transaction ID: C23581

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Craig R. Fox

Mailing Address 1309 Palisades Beach Rd.

City	State	Zip Code
Santa Monica	CA	90401

FEC ID number of contributing
federal political committee.**C**Name of Employer
UCLAOccupation
Associate Professor

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 0	/	0 1	/	2 0 0 5

Transaction ID: C23518

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 43 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Mark Freitas Mailing Address 10 Spring House Rd. City State Zip Code Greenwich CT 06831 FEC ID number of contributing federal political committee. C Name of Employer Frank Crystal & Co. Occupation President & COO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 6 / 2 0 0 5 Transaction ID: C23519 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Mark P. Gorenberg Mailing Address 822 Northport St. City State Zip Code San Francisco CA 94109 FEC ID number of contributing federal political committee. C Name of Employer Hummer Winblad Occupation Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5 Transaction ID: C23522 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) David Goulden Mailing Address 27 River St. City State Zip Code Concord MA 01742 FEC ID number of contributing federal political committee. C Name of Employer EMC Corporation Occupation Executive VP Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: C23523 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 44 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Lorna J. Hagstrom Mailing Address 921 S. Hill Ave. City Deland State FL Zip Code 32724 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2250.00	Date of Receipt MM / DD / YYYY 09 / 09 / 2005 Transaction ID: C23524 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Lorna J. Hagstrom Mailing Address 921 S. Hill Ave. City Deland State FL Zip Code 32724 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2250.00	Date of Receipt MM / DD / YYYY 09 / 09 / 2005 Transaction ID: C23525 Amount of Each Receipt this Period 150.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) John Hannan Mailing Address 1133 5th Ave. City New York State NY Zip Code 10019 FEC ID number of contributing federal political committee. C Name of Employer Occupation Partner Lion Advisors Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00	Date of Receipt MM / DD / YYYY 09 / 16 / 2005 Transaction ID: C23587 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 45 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) John Hannan Mailing Address 1133 5th Ave. City State Zip Code New York NY 10019 FEC ID number of contributing federal political committee. C Name of Employer Occupation Lion Advisors Partner Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4200.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 6 / 2 0 0 5 Transaction ID: C23583 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Judith Hannan Mailing Address 1301 Avenue of America 38th Floor City State Zip Code New York NY 10019 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3800.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 6 / 2 0 0 5 Transaction ID: C23584 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Judith Hannan Mailing Address 1301 Avenue of America 38th Floor City State Zip Code New York NY 10019 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3800.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 1 6 / 2 0 0 5 Transaction ID: C23585 Amount of Each Receipt this Period 1700.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
SUBTOTAL of Receipts This Page (optional) ►	
TOTAL This Period (last page this line number only) ►	

0.00

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

FOR LINE NUMBER: PAGE 46 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Thomas Heiser Mailing Address 215 Pond St. City State Zip Code Hopkinton MA 01748 FEC ID number of contributing federal political committee. C Name of Employer Occupation EMC Corporation Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	Date of Receipt MM / DD / YYYY 10 / 14 / 2005 Transaction ID: C23526 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Will Hooper Mailing Address Route 1, Box 60 City State Zip Code Sprott AL 36779 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	Date of Receipt MM / DD / YYYY 09 / 20 / 2005 Transaction ID: C23527 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Rampa Hormel Mailing Address 2750 32nd St. NW City State Zip Code Washington DC 20008 FEC ID number of contributing federal political committee. C Name of Employer Occupation Self-employed Environmentalist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	Date of Receipt MM / DD / YYYY 09 / 26 / 2005 Transaction ID: C23528 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 47 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Alice Huang

Mailing Address 415 South Hill Ave.

City

Pasadena

State

CA

Zip Code

91106

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cal Tech

Occupation

Senior Councilor for External Relation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 5

Transaction ID: C23529

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Paige L. Jansen

Mailing Address 1201 Ivy Brook Ln.

City

Atlanta

State

GA

Zip Code

30319

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jansen Advertising, Inc.

Occupation

President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 0 / 2 0 0 5

Transaction ID: C23530

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Jicarilla Apache Tribe

Mailing Address P.O. Box 507

City

Dulce

State

NM

Zip Code

87528

FEC ID number of contributing
federal political committee.

C

Name of Employer
Funds Permissible Under
the Act

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: C23531

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 48 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Jicarilla Apache Tribe

Mailing Address P.O. Box 507

City	State	Zip Code
Dulce	NM	87528

FEC ID number of contributing
federal political committee.**C**Name of Employer
Funds Permissible Under
the Act
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Occupation

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	1		2	0	0	5

Transaction ID: C23532

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

B. Full Name (Last, First, Middle Initial)
Philip W. Johnston

Mailing Address 99 Summer St.

City	State	Zip Code
Boston	MA	02110

FEC ID number of contributing
federal political committee.**C**Name of Employer
Philip Johnston & Associa-
tes
 Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼
Occupation
President

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	0	5

Transaction ID: C23533

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

C. Full Name (Last, First, Middle Initial)
Robert T. Jones, Jr.

Mailing Address 705 Forest Ave.

City	State	Zip Code
Palo Alto	CA	94301

FEC ID number of contributing
federal political committee.**C**Name of Employer
Robert Trent Jones LLC
 Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼
Occupation
Golf Course Architect

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	5

Transaction ID: C23534

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 49 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
 William Josephson
 Mailing Address 1 New York Plaza

City State Zip Code
 New York NY 10004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 9 / 2 0 / 2 0 0 5

Transaction ID: C23535

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

B. Full Name (Last, First, Middle Initial)
 Harry Kraut
 Mailing Address 1800 Atlantic Blvd.

City State Zip Code
 Key West FL 33040

FEC ID number of contributing federal political committee.

C

Name of Employer
Leonard Bernstein Inc.

Occupation

Manager

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 7 / 2 0 0 5

Transaction ID: C23536

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

C. Full Name (Last, First, Middle Initial)
 Anne C. Kremer
 Mailing Address 7 Lake Hollingsworth Dr.

City State Zip Code
 Lakeland FL 33803

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: C23537

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 50 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. William B. Kremer

Mailing Address 7 Lake Hollingsworth Dr.

City	State	Zip Code
Lakeland	FL	33803

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	5

Transaction ID: C23538

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Mark Lewis

Mailing Address 17 Fawn Ridge Rd.

City	State	Zip Code
Hopkinton	MA	01748

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC Corporation

Occupation

Executive VP & Chief Development Officer

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	5

Transaction ID: C23539

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Mark Link

Mailing Address 60 Witherell Dr.

City	State	Zip Code
Sudbury	MA	01776

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC Corporation

Occupation

VP & Chief Accounting Officer

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	5

Transaction ID: C23540

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 51 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

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

Kenneth J. Lucianin

Mailing Address 431 Broadway

City	State	Zip Code
Passaic Park	NJ	07055

FEC ID number of contributing
federal political committee.

C

Name of Employer
NY Port AuthorityOccupation
Attorney

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	6		2	0	0	5

Transaction ID: C23541

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

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

Ralph M. Mariano

Mailing Address P.O. Box 4736

City	State	Zip Code
Middletown	RI	02842

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dept. of DefenseOccupation
Engineer

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	5

Transaction ID: C23542

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

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

Randal Mathis

Mailing Address 5302 Swiss Ave.

City	State	Zip Code
Dallas	TX	75214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mathis & DonheiserOccupation
Attorney

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	5

Transaction ID: C23543

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 52 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Rebekah Mathis Mailing Address 5302 Swiss Ave. City State Zip Code Dallas TX 75214 FEC ID number of contributing federal political committee. C Name of Employer Mathis & Donheiser Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00	Date of Receipt MM / DD / YYYY 09 / 20 / 2005 Transaction ID: C23544 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Giselle McKellar Anshuetz Mailing Address 2 Irving Ave. City State Zip Code Atherton CA 94027 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	Date of Receipt MM / DD / YYYY 09 / 20 / 2005 Transaction ID: C23545 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Mescalero Apache Tribe Mailing Address 101 Central Ave. P.O. Box 227 City State Zip Code Mescalero NM 88340 FEC ID number of contributing federal political committee. C Name of Employer Funds Permissible Under the Act Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2500.00	Date of Receipt MM / DD / YYYY 10 / 14 / 2005 Transaction ID: C23547 Amount of Each Receipt this Period 400.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
SUBTOTAL of Receipts This Page (optional) ►	
TOTAL This Period (last page this line number only) ►	

0.00

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

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

FOR LINE NUMBER: PAGE 53 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Mescalero Apache Tribe Mailing Address 101 Central Ave. P.O. Box 227 City Mescalero State NM Zip Code 88340 FEC ID number of contributing federal political committee. C Name of Employer Funds Permissible Under the Act Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 2500.00		Date of Receipt MM / DD / YYYY 10 / 14 / 2005 Transaction ID: C23546 Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Bruce Morgan Mailing Address 5527 Bradley Blvd. City Alexandria State VA Zip Code 22311 FEC ID number of contributing federal political committee. C Name of Employer Thomas Advisors Inc. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Consultant Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 09 / 26 / 2005 Transaction ID: C23548 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Wallace R. Nichols, Jr. Mailing Address 15770 N. Greenway-Hayden Loop Suite 104 City Scottsdale State AZ Zip Code 85260 FEC ID number of contributing federal political committee. C Name of Employer Wallace R. Nichols & Associates Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Attorney Election Cycle-to-Date ▼ 600.00		Date of Receipt MM / DD / YYYY 10 / 07 / 2005 Transaction ID: C23550 Amount of Each Receipt this Period 600.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 54 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Nis Nissen Mailing Address 4406 Sugartree Dr. City Lakeland State FL Zip Code 33803 FEC ID number of contributing federal political committee. C Name of Employer Nissen Advertising Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5 Transaction ID: C23551 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Mary E. ORourke Mailing Address 150 Midway Rd. Suite 157 City Cranston State RI Zip Code 02920 FEC ID number of contributing federal political committee. C Name of Employer ASFT Occupation Government Relations Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: C23552 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Mark Quigley Mailing Address 19 Stonegate Ln. City Westwood State MA Zip Code 02090 FEC ID number of contributing federal political committee. C Name of Employer EMC Corporation Occupation Senior VP & CIO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 5 Transaction ID: C23557 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 55 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Ellen F. Ratner		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 2514 Mill Rd.		Transaction ID: C23558
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer IBN Radio	Occupation Host	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

B. Full Name (Last, First, Middle Initial) Ellen F. Ratner		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 5
Mailing Address 2514 Mill Rd.		Transaction ID: C23559
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer IBN Radio	Occupation Host	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

C. Full Name (Last, First, Middle Initial) Elizabeth L. Ricci		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 5
Mailing Address 3 Salem Dr.		Transaction ID: C23560
City North Providence	State RI	Zip Code 02904
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)

0.00

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 56 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Carol Riley Mailing Address 483 Jerusalem Rd. City State Zip Code Cohasset MA 02025 FEC ID number of contributing federal political committee. C Name of Employer Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">500.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 5 </div> Transaction ID: C23561 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">500.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
B. Full Name (Last, First, Middle Initial) Michael Ruettgers Mailing Address 453 Bedford Rd. City State Zip Code Carlisle MA 01741 FEC ID number of contributing federal political committee. C Name of Employer Occupation EMC Chairman Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2100.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 0 5 </div> Transaction ID: C23562 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2100.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser
C. Full Name (Last, First, Middle Initial) Joe P. Ruthven Mailing Address P.O. Box 2420 City State Zip Code Lakeland FL 33806 FEC ID number of contributing federal political committee. C Name of Employer Occupation Self-employed Real Estate Developer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1000.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 5 </div> Transaction ID: C23563 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)**0.00****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 57 / 170

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Friends of Patrick J. Kennedy Inc.

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

William Scannell

Mailing Address 8 Overfield Dr.

City	State	Zip Code
Medfield	MA	02052

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC CorporationOccupation
Senior VP of Sales

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	4		2	0	0	5

Transaction ID: C23564

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

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

Diane N. Schirtzer

Mailing Address 4940 Latigo Canyon Rd.

City	State	Zip Code
Malibu	CA	90265

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employedOccupation
Attorney

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	7		2	0	0	5

Transaction ID: C23549

Amount of Each Receipt this Period

125.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

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

Tom B. Scott, III

Mailing Address P.O. Box 2009

City	State	Zip Code
Jackson	MS	39215

FEC ID number of contributing
federal political committee.

C

Name of Employer
Scott & Scott Ltd.Occupation
Attorney

Receipt For: 2006

☒ Primary
 ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	0		2	0	0	5

Transaction ID: C23565

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 58 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Maria Shriver		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 5
Mailing Address 3110 Main St. #300		Transaction ID: C23567
City State Zip Code Santa Monica CA 90405	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Freelance Journalist	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

B. Full Name (Last, First, Middle Initial) Michael A. Steinberg		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 14706 Clarendon Dr.		Transaction ID: C23568
City State Zip Code Tampa FL 33624	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

C. Full Name (Last, First, Middle Initial) Miriam Steinberg		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 7 / 2 0 0 5
Mailing Address 14706 Clarendon Dr.		Transaction ID: C23569
City State Zip Code Tampa FL 33624	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Engineer	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] * Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 59 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Maurice Tempelman

Mailing Address 529 5th Ave.

City State Zip Code
 New York NY 10017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leon Tempelman & Sons

Occupation
Business Executive

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 0 / 2 0 0 5

Transaction ID: C23570

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

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

Ann Marie Teuber

Mailing Address 46 Ferncroft Rd.

City State Zip Code
 Newton MA 02468

FEC ID number of contributing
federal political committee.

C

Name of Employer
Family Center

Occupation
Therapist

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: C23571

Amount of Each Receipt this Period

1050.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

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

William Teuber, Jr.

Mailing Address 46 Ferncroft Rd.

City State Zip Code
 Newton MA 02468

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC Corporation

Occupation
Executive VP & CFO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 4 / 2 0 0 5

Transaction ID: C23572

Amount of Each Receipt this Period

1050.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 60 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Tabitha Totten

Mailing Address 550 Anderson Ave. # 2

City State Zip Code
 Cliffside Park NJ 07010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 0 / 2 0 0 5

Transaction ID: C23573

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Stanley M. Toy, Jr.

Mailing Address 1217 Charmont Rd.

City State Zip Code
 La Verne CA 91750

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southwestern Medical Group

Occupation
CEO

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23614

Amount of Each Receipt this Period

1900.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Stanley M. Toy, Jr.

Mailing Address 1217 Charmont Rd.

City State Zip Code
 La Verne CA 91750

FEC ID number of contributing
federal political committee.

C

Name of Employer
Southwestern Medical Group

Occupation
CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23574

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 61 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Joseph Tucci

Mailing Address 10 Mountain Laurel Dr.

City State Zip Code
 Nashua NH 03060

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMC

Occupation
President & CEO

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 2 6 / 2 0 0 5

Transaction ID: C23575

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

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

US Cares PAC

Mailing Address P.O. Box 491326

City State Zip Code
 Los Angeles CA 90049

FEC ID number of contributing
federal political committee.

C C00413815

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 8 / 2 0 0 5

Transaction ID: C23577

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

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

Elaine R. Wolfensohn

Mailing Address 5305 Prince Pl.

City State Zip Code
 Jackson WY 83001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Educator

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 1 6 / 2 0 0 5

Transaction ID: C23579

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional)

0.00

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 62 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. J. Stanley Yake

Mailing Address 347 Loudonville Rd.

City State Zip Code
 Loudonville NY 12211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Entrepreneur

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23586

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Ghazal & Associates LLC

Mailing Address 1331 H St. NW
Suite 1200

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23520

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

LLC permissible funds see
below if itemized

Full Name (Last, First, Middle Initial)

C. Jay C. Ghazal

Mailing Address 4870A Old Dominion Dr.

City State Zip Code
 Arlington VA 22207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ghazal & Associates LLC

Occupation
President

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 0 1 / 2 0 0 5

Transaction ID: C23521

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

35990.08

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

FOR LINE NUMBER: PAGE 63 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A.

Full Name (Last, First, Middle Initial)

Cingular Wireless

Mailing Address P.O. Box 828435

City	State	Zip Code
Philadelphia	PA	19182

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 2	/	0 2	/	2 0 0 5

Transaction ID: C23589

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Refund - Telephone deposit

B.

Full Name (Last, First, Middle Initial)

Postmaster

Mailing Address 24 Corliss St.

City	State	Zip Code
Providence	RI	02904

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

826.41

Date of Receipt

M M	/	D D	/	Y Y Y Y
1 2	/	1 2	/	2 0 0 5

Transaction ID: C23588

Amount of Each Receipt this Period

826.41

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Refund - Postage

SUBTOTAL of Receipts This Page (optional)

1076.41

TOTAL This Period (last page this line number only)

1076.41

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

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

FOR LINE NUMBER: PAGE 64 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 5
Mailing Address 111 Westminster St.		Transaction ID: C23590
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 167.80
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1728.63	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

B. Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address 111 Westminster St.		Transaction ID: C23591
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.40
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1728.63	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

C. Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address 111 Westminster St.		Transaction ID: C23592
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 58.50
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1728.63	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

SUBTOTAL of Receipts This Page (optional)

284.70

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 65 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Citizens Bank
Mailing Address 601 Washington St.

City State Zip Code
Stoughton MA 02072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12932.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 5

Transaction ID: C23593

Amount of Each Receipt this Period

1298.81

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Interest

B. Full Name (Last, First, Middle Initial)
Citizens Bank
Mailing Address 601 Washington St.

City State Zip Code
Stoughton MA 02072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12932.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 5

Transaction ID: C23594

Amount of Each Receipt this Period

1480.50

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Interest

C. Full Name (Last, First, Middle Initial)
Citizens Bank
Mailing Address 601 Washington St.

City State Zip Code
Stoughton MA 02072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

12932.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 5

Transaction ID: C23646

Amount of Each Receipt this Period

379.11

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

* Interest

SUBTOTAL of Receipts This Page (optional)

3158.42

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 66 / 170

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) Citizens Bank Mailing Address 601 Washington St. City Stoughton State MA Zip Code 02072 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 12932.76		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5 Transaction ID: C23647 Amount of Each Receipt this Period 380.26 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest
B. Full Name (Last, First, Middle Initial) Citizens Bank Mailing Address 601 Washington St. City Stoughton State MA Zip Code 02072 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 12932.76		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5 Transaction ID: C23612 Amount of Each Receipt this Period 1589.98 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

SUBTOTAL of Receipts This Page (optional)

1970.24

TOTAL This Period (last page this line number only)

5413.36

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 67 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. American Express Merchant Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7854

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

35.00

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

Full Name (Last, First, Middle Initial)

B. American Express Merchant Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8184

Date of Disbursement

10 / 28 / 2005

Amount of Each Disbursement this Period

4.50

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

Full Name (Last, First, Middle Initial)

C. American Express Merchant Services

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8180

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

105.00

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

SUBTOTAL of Disbursements This Page (optional)

144.50

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 68 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Beacon Mutual Insurance

Mailing Address 1 Beacon Center

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement
Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

167.00

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

Full Name (Last, First, Middle Initial)

B. Beacon Mutual Insurance

Mailing Address 1 Beacon Center

City
Warwick

State
RI

Zip Code
02886

Purpose of Disbursement
Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8201

Date of Disbursement

/ /

Amount of Each Disbursement this Period

159.00

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

Full Name (Last, First, Middle Initial)

C. Blackstone Valley Tourism Council

Mailing Address 175 Main St.

City
Pawtucket

State
RI

Zip Code
02860

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8070

Date of Disbursement

/ /

Amount of Each Disbursement this Period

300.00

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

SUBTOTAL of Disbursements This Page (optional)

626.00

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 69 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Broadway of Chicago

Mailing Address 17 North State St.
Suite 810

City Chicago State IL Zip Code 60602

Purpose of Disbursement

Reception cost

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8118

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

1450.00

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

Full Name (Last, First, Middle Initial)

B. Russell Budd

Mailing Address 3102 Oak Lawn Ave.

City Dallas State TX Zip Code 75219

Purpose of Disbursement

Reception cost

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7981

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

1417.42

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

Full Name (Last, First, Middle Initial)

C. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement

Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7870

Date of Disbursement

10 / 15 / 2005

Amount of Each Disbursement this Period

378.97

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

SUBTOTAL of Disbursements This Page (optional)

3246.39

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 70 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North Kingstown

State
RI

Zip Code
02852

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7983

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

378.97

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

Full Name (Last, First, Middle Initial)

B. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North Kingstown

State
RI

Zip Code
02852

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7996

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

53.00

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

Full Name (Last, First, Middle Initial)

C. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North Kingstown

State
RI

Zip Code
02852

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8065

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

378.97

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

SUBTOTAL of Disbursements This Page (optional)

810.94

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 PageFOR LINE NUMBER:
(check only one)

PAGE 71 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼**Transaction ID: D8088**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

378.97

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

Full Name (Last, First, Middle Initial)

B. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼**Transaction ID: D8133**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Amount of Each Disbursement this Period

378.97

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

Full Name (Last, First, Middle Initial)

C. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Void check issued prior period

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼**Transaction ID: D8185**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	0	5

Amount of Each Disbursement this Period

-30.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional)

727.94

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 72 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North Kingstown

State
RI

Zip Code
02852

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8205

Date of Disbursement

12 / 30 / 2005

Amount of Each Disbursement this Period

378.97

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

Full Name (Last, First, Middle Initial)

B. Care First Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City
Baltimore

State
MD

Zip Code
21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7856

Date of Disbursement

10 / 07 / 2005

Amount of Each Disbursement this Period

249.00

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

Full Name (Last, First, Middle Initial)

C. Care First Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City
Baltimore

State
MD

Zip Code
21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7875

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

249.00

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

SUBTOTAL of Disbursements This Page (optional)

876.97

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)

PAGE 73 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Care First Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8061

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

249.00

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

Full Name (Last, First, Middle Initial)

B. Care First Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8127

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

249.00

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

Full Name (Last, First, Middle Initial)

C. Carlone's Florist

Mailing Address 16 Dexter St.

City Portsmouth State RI Zip Code 02871

Purpose of Disbursement
Constituent expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8124

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

107.00

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

SUBTOTAL of Disbursements This Page (optional)

605.00

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 74 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7865

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

280.70

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

Full Name (Last, First, Middle Initial)

B. Cingular Wireless

Mailing Address P.O. Box 828435

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7877

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

83.94

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

Full Name (Last, First, Middle Initial)

C. Cingular Wireless

Mailing Address P.O. Box 828435

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8006

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

62.45

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

SUBTOTAL of Disbursements This Page (optional)

427.09

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)

PAGE 75 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Cingular Wireless

Mailing Address P.O. Box 828435

City
Philadelphia

State
PA

Zip Code
19182

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8128

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

60.95

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

Full Name (Last, First, Middle Initial)

B. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement

Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7850

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

2079.56

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

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement

Service charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7855

Date of Disbursement

10 / 04 / 2005

Amount of Each Disbursement this Period

7.00

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

SUBTOTAL of Disbursements This Page (optional)

2147.51

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 76 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement

Service charge

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8090

Date of Disbursement

10 / 13 / 2005

Amount of Each Disbursement this Period

7.00

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

Full Name (Last, First, Middle Initial)

B. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement

Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7882

Date of Disbursement

10 / 18 / 2005

Amount of Each Disbursement this Period

54.22

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

Full Name (Last, First, Middle Initial)

C. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement

Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7998

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

2079.55

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

SUBTOTAL of Disbursements This Page (optional)

2140.77

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 77 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Citizens Bank

Mailing Address 601 Washington St.

City
Stoughton

State
MA

Zip Code
02072

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8105

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

2079.56

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

Full Name (Last, First, Middle Initial)

B. Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Constituent expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7976

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

183.50

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

Full Name (Last, First, Middle Initial)

C. Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Constituent expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8009

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

91.75

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

SUBTOTAL of Disbursements This Page (optional)

2354.81

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 78 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Constituent expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8200

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

480.35

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

Full Name (Last, First, Middle Initial)

B. Covad Communications

Mailing Address P.O. Box 39000
Dept. 33408

City
San Francisco

State
CA

Zip Code
94139

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7863

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

74.50

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

Full Name (Last, First, Middle Initial)

C. Covad Communications

Mailing Address P.O. Box 39000
Dept. 33408

City
San Francisco

State
CA

Zip Code
94139

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7997

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

74.50

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

SUBTOTAL of Disbursements This Page (optional)

629.35

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 PageFOR LINE NUMBER:
(check only one)

PAGE 79 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Covad CommunicationsMailing Address P.O. Box 39000
Dept. 33408

City San Francisco State CA Zip Code 94139

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8104

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	5

Amount of Each Disbursement this Period

74.50

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

Full Name (Last, First, Middle Initial)

B. District of ColumbiaMailing Address P.O. Box 7792
Ben Franklin Station

City Washington State DC Zip Code 20044

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7851

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	3	/	2	0	0	5

Amount of Each Disbursement this Period

379.00

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

Full Name (Last, First, Middle Initial)

C. District of ColumbiaMailing Address P.O. Box 7792
Ben Franklin Station

City Washington State DC Zip Code 20044

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7999

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	5

Amount of Each Disbursement this Period

379.00

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

SUBTOTAL of Disbursements This Page (optional)

832.50

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 PageFOR LINE NUMBER:
(check only one)

PAGE 80 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. District of ColumbiaMailing Address P.O. Box 7792
Ben Franklin Station

City Washington State DC Zip Code 20044

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8106

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	5

Amount of Each Disbursement this Period

379.00

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

Full Name (Last, First, Middle Initial)

B. ETSMailing Address 10 Pidgeon Hill Dr.
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8092

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	5

Amount of Each Disbursement this Period

113.96

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

Full Name (Last, First, Middle Initial)

C. ETSMailing Address 10 Pidgeon Hill Dr.
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8091

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	3	1	/	2	0	0	5

Amount of Each Disbursement this Period

29.89

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

SUBTOTAL of Disbursements This Page (optional)

522.85

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 81 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. ETS

Full Name (Last, First, Middle Initial)

Mailing Address 10 Pidgeon Hill Dr.
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8181

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

30.00

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

B. ETS

Full Name (Last, First, Middle Initial)

Mailing Address 10 Pidgeon Hill Dr.
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8182

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

30.00

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

C. Family Resources Community Action

Full Name (Last, First, Middle Initial)

Mailing Address 245 Main St.

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7874

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

175.00

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

SUBTOTAL of Disbursements This Page (optional)

235.00

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 82 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Family Resources Community Action

Mailing Address 245 Main St.

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement

Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7975

Date of Disbursement

10 / 21 / 2005

Amount of Each Disbursement this Period

125.00

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

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7848

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

11.25

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

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7862

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

24.81

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

SUBTOTAL of Disbursements This Page (optional)

161.06

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 83 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7880

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

36.82

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

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7987

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

43.20

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

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8010

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

15.52

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

SUBTOTAL of Disbursements This Page (optional)

95.54

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 84 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8123

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

18.58

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

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8120

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

56.40

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

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8190

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

34.44

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

SUBTOTAL of Disbursements This Page (optional)

109.42

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 85 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address P.O. Box 360353

City
Pittsburgh

State
PA

Zip Code
15250

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8202

Date of Disbursement

/ /

Amount of Each Disbursement this Period

26.51

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

Full Name (Last, First, Middle Initial)

B. Framery, Inc.

Mailing Address 418 Benefit St.

City
Pawtucket

State
RI

Zip Code
02861

Purpose of Disbursement
Photos

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7847

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.80

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

Full Name (Last, First, Middle Initial)

C. Framery, Inc.

Mailing Address 418 Benefit St.

City
Pawtucket

State
RI

Zip Code
02861

Purpose of Disbursement
Photos

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8086

Date of Disbursement

/ /

Amount of Each Disbursement this Period

90.26

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

SUBTOTAL of Disbursements This Page (optional)

148.57

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 86 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement

Office expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8126

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

9.36

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

Full Name (Last, First, Middle Initial)

B. Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement

Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8134

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

831.85

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

Full Name (Last, First, Middle Initial)

C. Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement

Reception cost

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8196

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

61.50

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

SUBTOTAL of Disbursements This Page (optional)

902.71

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 PageFOR LINE NUMBER:
(check only one)

PAGE 87 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement
Wages

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8208

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

700.88

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

Full Name (Last, First, Middle Initial)

B. Jewish Voice & Herald

Mailing Address 130 Sessions St.

City Providence State RI Zip Code 02906

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7992

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	7	/	2	0	0	5

Amount of Each Disbursement this Period

434.00

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

Full Name (Last, First, Middle Initial)

C. Jewish Voice & Herald

Mailing Address 130 Sessions St.

City Providence State RI Zip Code 02906

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8191

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

234.00

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

SUBTOTAL of Disbursements This Page (optional)

1368.88

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 88 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Patrick J. Kennedy

Mailing Address P.O. Box 958

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8119

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

285.62

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

Full Name (Last, First, Middle Initial)

B. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7840

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

600.00

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

Full Name (Last, First, Middle Initial)

C. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7846

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

85.00

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

SUBTOTAL of Disbursements This Page (optional)

970.62

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)

PAGE 89 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7858

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

61.94

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

Full Name (Last, First, Middle Initial)

B. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7988

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

600.00

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

Full Name (Last, First, Middle Initial)

C. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8011

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

78.10

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

SUBTOTAL of Disbursements This Page (optional)

740.04

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 90 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Kieloch Consulting

Mailing Address 400 C. St. NE

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8101

Date of Disbursement

/ /

Amount of Each Disbursement this Period

600.00

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

Full Name (Last, First, Middle Initial)

B. MCI Worldcom

Mailing Address P.O. Box 856053

City
Louisville

State
KY

Zip Code
40285

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7843

Date of Disbursement

/ /

Amount of Each Disbursement this Period

197.16

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

Full Name (Last, First, Middle Initial)

C. MCI Worldcom

Mailing Address P.O. Box 856053

City
Louisville

State
KY

Zip Code
40285

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7986

Date of Disbursement

/ /

Amount of Each Disbursement this Period

186.99

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

SUBTOTAL of Disbursements This Page (optional)

984.15

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 PageFOR LINE NUMBER:
(check only one)

PAGE 91 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. MCI Worldcom

Mailing Address P.O. Box 856053

City
LouisvilleState
KYZip Code
40285Purpose of Disbursement
Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8103

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	5

Amount of Each Disbursement this Period

175.90

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

Full Name (Last, First, Middle Initial)

B. Newport County Branch NAACP

Mailing Address 72E Dr. Marcus F. Wheatland Blvd.

City
NewportState
RIZip Code
02840Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7873

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

125.00

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

Full Name (Last, First, Middle Initial)

C. Newport St. Patrick's Day Parade Committee

Mailing Address P.O. Box 1404

City
NewportState
RIZip Code
02840Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8069

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	1	/	2	0	0	5

Amount of Each Disbursement this Period

230.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional)

530.90

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 92 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. NGP Software

Mailing Address 5039 Connecticut Ave. NW
Suite 1A

City Washington State DC Zip Code 20008

Purpose of Disbursement
Computer software

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7864

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

1150.00

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

Full Name (Last, First, Middle Initial)

B. NGP Software

Mailing Address 5039 Connecticut Ave. NW
Suite 1A

City Washington State DC Zip Code 20008

Purpose of Disbursement
Computer software

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8198

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

450.00

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

Full Name (Last, First, Middle Initial)

C. O-N Radio, Inc.

Mailing Address 1 Social St.

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8003

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

75.00

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

SUBTOTAL of Disbursements This Page (optional)

1675.00

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 93 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Postmaster

Mailing Address 15 Wall St.

City
Foxboro

State
MA

Zip Code
02035

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7841

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

74.00

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

Full Name (Last, First, Middle Initial)

B. Postmaster

Mailing Address 15 Wall St.

City
Foxboro

State
MA

Zip Code
02035

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8066

Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

74.00

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

Full Name (Last, First, Middle Initial)

C. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7869

Date of Disbursement

10 / 15 / 2005

Amount of Each Disbursement this Period

1614.76

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

SUBTOTAL of Disbursements This Page (optional)

1762.76

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 94 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7984

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

1614.76

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

Full Name (Last, First, Middle Initial)

B. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8063

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

1614.76

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

Full Name (Last, First, Middle Initial)

C. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8087

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

1614.76

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

SUBTOTAL of Disbursements This Page (optional)

4844.28

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 95 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8125

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

291.50

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

Full Name (Last, First, Middle Initial)

B. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8132

Date of Disbursement

12 / 15 / 2005

Amount of Each Disbursement this Period

1614.76

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

Full Name (Last, First, Middle Initial)

C. Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8207

Date of Disbursement

12 / 30 / 2005

Amount of Each Disbursement this Period

1614.76

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

SUBTOTAL of Disbursements This Page (optional)

3521.02

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 96 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Rhode Island Trooper Association

Mailing Address 626 Park Ave.
Suite 1A

City Cranston State RI Zip Code 02910

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7977

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

295.00

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

Full Name (Last, First, Middle Initial)

B. RI Dept. of Employment &

Mailing Address Training
One Capitol Hill Suite 36

City Providence State RI Zip Code 02908

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7883

Date of Disbursement

10 / 18 / 2005

Amount of Each Disbursement this Period

371.13

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

Full Name (Last, First, Middle Initial)

C. Ryan, Phillips, Utrecht &

Mailing Address MacKinnon
1133 Connecticut Ave. NW #300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Professional services-Legal

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7842

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

804.82

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

SUBTOTAL of Disbursements This Page (optional)

1470.95

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 PageFOR LINE NUMBER:
(check only one)

PAGE 97 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Ryan, Phillips, Utrecht &Mailing Address MacKinnon
1133 Connecticut Ave. NW #300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Professional services-Legal

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7985

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		3	1		2	0	0	5

Amount of Each Disbursement this Period

277.81

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

Full Name (Last, First, Middle Initial)

B. Ryan, Phillips, Utrecht &Mailing Address MacKinnon
1133 Connecticut Ave. NW #300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Professional services-Legal

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8072

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	1		2	0	0	5

Amount of Each Disbursement this Period

706.87

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

Full Name (Last, First, Middle Initial)

C. Ryan, Phillips, Utrecht &Mailing Address MacKinnon
1133 Connecticut Ave. NW #300

City Washington State DC Zip Code 20036

Purpose of Disbursement
Professional services-Legal

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8192

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	0		2	0	0	5

Amount of Each Disbursement this Period

131.94

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

SUBTOTAL of Disbursements This Page (optional)

1116.62

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 PageFOR LINE NUMBER:
(check only one)

PAGE 98 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City
BristowState
VAZip Code
20136Purpose of Disbursement
Office expense

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7849

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	5

Amount of Each Disbursement this Period

22.86

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

Full Name (Last, First, Middle Initial)

B. Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City
BristowState
VAZip Code
20136Purpose of Disbursement
Office expense

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7980

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	5

Amount of Each Disbursement this Period

22.86

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

Full Name (Last, First, Middle Initial)

C. Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City
BristowState
VAZip Code
20136Purpose of Disbursement
Office expense

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8001

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		0	7		2	0	0	5

Amount of Each Disbursement this Period

22.86

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

SUBTOTAL of Disbursements This Page (optional)

68.58

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 99 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8073

Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

22.86

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

Full Name (Last, First, Middle Initial)

B. Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8109

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

22.86

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

Full Name (Last, First, Middle Initial)

C. St. Joseph Health Services of RI

Mailing Address 3rd Fl., Marian Hall
200 High Service Ave.

City
North Providence

State
RI

Zip Code
02904

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7859

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional)

545.72

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 100 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. State of Rhode Island

Mailing Address Division of Taxation
One Capitol Hill

City State Zip Code
Providence RI 02908

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7852

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

36.10

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

Full Name (Last, First, Middle Initial)

B. State of Rhode Island

Mailing Address Division of Taxation
One Capitol Hill

City State Zip Code
Providence RI 02908

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8000

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

36.10

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

Full Name (Last, First, Middle Initial)

C. State of Rhode Island

Mailing Address Division of Taxation
One Capitol Hill

City State Zip Code
Providence RI 02908

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8107

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

36.10

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

SUBTOTAL of Disbursements This Page (optional)

108.30

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 PageFOR LINE NUMBER:
(check only one)

PAGE 101 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P.O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7844

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	0	5

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P.O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7872

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	7		2	0	0	5

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. United Parcel Service

Mailing Address P.O. Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

 Office Sought: ☐ House
☐ Senate
☐ President

 Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	2		2	0	0	5

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
SUBTOTAL of Disbursements This Page (optional)**90.79****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 102 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. United Parcel Service

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8188

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

51.47

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

Full Name (Last, First, Middle Initial)

B. United Parcel Service

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8189

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

26.76

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

Full Name (Last, First, Middle Initial)

C. Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Professional services-Accounting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7857

Date of Disbursement

10 / 07 / 2005

Amount of Each Disbursement this Period

7000.00

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

SUBTOTAL of Disbursements This Page (optional)

7078.23

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 103 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Professional services-Accounting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7989

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

7000.00

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

Full Name (Last, First, Middle Initial)

B. Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement
Professional services-Accounting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8102

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

7000.00

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

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7845

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

147.67

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

SUBTOTAL of Disbursements This Page (optional)

14147.67

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 104 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7861

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

103.16

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

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7860

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

203.08

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

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7871

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

107.27

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

SUBTOTAL of Disbursements This Page (optional)

413.51

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 105 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8060

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

111.87

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

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8008

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

196.36

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

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8007

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

55.45

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

SUBTOTAL of Disbursements This Page (optional)

363.68

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 106 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8122

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

53.32

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

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8121

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

196.31

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

Full Name (Last, First, Middle Initial)

C. Verizon Wireless

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8195

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

106.20

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

SUBTOTAL of Disbursements This Page (optional)

355.83

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 107 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7881

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

82.94

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

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7879

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

218.09

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

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8068

Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

83.98

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

SUBTOTAL of Disbursements This Page (optional)

385.01

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 108 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8085

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

236.17

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

Full Name (Last, First, Middle Initial)

B. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8197

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

201.33

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

Full Name (Last, First, Middle Initial)

C. Verizon

Mailing Address P.O. Box 28007

City State Zip Code
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8193

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

82.03

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

SUBTOTAL of Disbursements This Page (optional)

519.53

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 109 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. West Wing Writers

Mailing Address 1150 Connecticut Ave. NW

City
Washington

State
DC

Zip Code
20036

Purpose of Disbursement
Consultant-Political

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8062

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

5000.00

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

Full Name (Last, First, Middle Initial)

B. Westhill Partners

Mailing Address 60 Broad St. 29th Fl.

City
New York

State
NY

Zip Code
10004

Purpose of Disbursement
Consultant-Research

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8108

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

7500.00

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

Full Name (Last, First, Middle Initial)

C. George Zainyeh

Mailing Address 433 Seaside Dr.

City
Jamestown

State
RI

Zip Code
02835

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7868

Date of Disbursement

10 / 15 / 2005

Amount of Each Disbursement this Period

622.40

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

SUBTOTAL of Disbursements This Page (optional)

13122.40

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 110 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7982

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

622.40

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

Full Name (Last, First, Middle Initial)

B. George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8064

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

622.40

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

Full Name (Last, First, Middle Initial)

C. George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8089

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

622.40

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

SUBTOTAL of Disbursements This Page (optional)

1867.20

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 PageFOR LINE NUMBER:
(check only one)

PAGE 111 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. George Zainyeh

Mailing Address 433 Seaside Dr.

City
JamestownState
RIZip Code
02835Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	5	/	2	0	0	5

Amount of Each Disbursement this Period

6	2	2	.	4	0
---	---	---	---	---	---

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

Full Name (Last, First, Middle Initial)

B. George Zainyeh

Mailing Address 433 Seaside Dr.

City
JamestownState
RIZip Code
02835Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8206

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

6	2	2	.	4	0
---	---	---	---	---	---

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

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City
NewarkState
NJZip Code
07101Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7866

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	5

Amount of Each Disbursement this Period

1	5	.	0	0
---	---	---	---	---

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

SUBTOTAL of Disbursements This Page (optional) ►

1259.80

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 112 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7867

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

12699.71

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

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd.

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7934

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

609.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd.

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7933

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

609.20

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

12699.71

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 113 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7898

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

147.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7897

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

246.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7888

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

36.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 114 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Bistro Bis

Mailing Address 15 E St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Reception cost

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7959

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

903.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7966

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

25.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7942

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

50.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 115 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D7887

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	5

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D7902

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	5

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D7921

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	0	5

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 116 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7938

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

100.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cumberland Farms

Mailing Address 1812 E Main Rd.

City Portsmouth State RI Zip Code 02871

Purpose of Disbursement

Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7889

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

47.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Dell Direct

Mailing Address 8801 Research Blvd.

City Austin State TX Zip Code 78758

Purpose of Disbursement

Computer

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7947

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

1852.73

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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 117 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. East Greenwich Photo & Studio

Mailing Address 631 Main St.

City East Greenwich State RI Zip Code 02818

Purpose of Disbursement
Photography

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7956

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

99.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hertz Car Rental

Mailing Address 544 Airport Rd.

City Warwick State RI Zip Code 02886

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7953

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

70.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hilton Hotel

Mailing Address 10330 Natural Bridge Rd.

City Saint Louis State MO Zip Code 63134

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7935

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

23.81

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 118 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. LaBella's Restaurant

Mailing Address 553 Hartford Ave.

City
Providence

State
RI

Zip Code
02909

Purpose of Disbursement
Meeting expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7911

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

61.68

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City
Los Angeles

State
CA

Zip Code
90067

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7949

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

15.33

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Postmaster

Mailing Address 90 Power Rd.

City
Pawtucket

State
RI

Zip Code
02860

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7910

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

39.98

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 119 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 10 Rod Rd.

City
Kingston

State
RI

Zip Code
02881

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7931

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

36.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 207 East Main Rd.

City
Middletown

State
RI

Zip Code
02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7928

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

45.55

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 207 East Main Rd.

City
Middletown

State
RI

Zip Code
02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7939

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

80.50

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 120 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement

Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7958

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

39.85

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement

Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7925

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

42.60

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 2025 Post Rd.

City Warwick State RI Zip Code 02888

Purpose of Disbursement

Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7905

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

36.70

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 121 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 2025 Post Rd.

City
Warwick

State
RI

Zip Code
02888

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7909

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

42.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 2025 Post Rd.

City
Warwick

State
RI

Zip Code
02888

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7918

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

28.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 10 Rod Rd.

City
Kingston

State
RI

Zip Code
02881

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7893

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

49.85

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 122 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7895

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

44.50

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 2525 East Main Rd.

City Portsmouth State RI Zip Code 02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7906

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

25.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7961

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

41.39

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 123 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7967

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

97.70

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7970

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

200.90

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7968

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

263.40

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 124 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Southwest Airlines

Mailing Address P.O. Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7969

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

378.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1007 Ten Rod Rd.

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement

Office supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7894

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

20.66

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 1007 Ten Rod Rd.

City North Kingstown State RI Zip Code 02852

Purpose of Disbursement

Office supplies

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7954

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

15.99

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 125 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Tasca Automotive Group

Mailing Address 1200 Pontiac Ave.

City Cranston State RI Zip Code 02920

Purpose of Disbursement
Vehicle maintenance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7943

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

793.86

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7940

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

280.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7946

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

719.20

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 126 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7899

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

474.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7900

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

366.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address P.O. Box 66100

City Chicago State IL Zip Code 60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7941

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

352.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 127 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address Crystal Park 4
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7917

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

209.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Airways

Mailing Address Crystal Park 4
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7957

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

476.90

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US Airways

Mailing Address Crystal Park 4
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7952

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

416.90

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 128 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address Crystal Park 4
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7926

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

207.70

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Verio Web Hosting

Mailing Address 1800 Old Okeechobee Rd.

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement
Website

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7896

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

99.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Verio Web Hosting

Mailing Address 1800 Old Okeechobee Rd.

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement
Website

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7915

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

149.85

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 129 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Washington Flyer Taxi

Mailing Address 44800 Copilot Way

City Dulles State VA Zip Code 20101

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7948

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

82.65

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7876

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

460.61

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

Full Name (Last, First, Middle Initial)

C. Biltmore Hotel

Mailing Address 11 Dorrance St.

City Providence State RI Zip Code 02903

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D7973

Date of Disbursement

10 / 17 / 2005

Amount of Each Disbursement this Period

213.57

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

460.61

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 PageFOR LINE NUMBER:
(check only one)

PAGE 130 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Knight CenterMailing Address Washington University in St. Louis
One Breaking Dr.

City Saint Louis State MO Zip Code 63130

Purpose of Disbursement

Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7974

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

247.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8014

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

3225.22

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

Full Name (Last, First, Middle Initial)

C. Booksamillion.com

Mailing Address 4354 Bryson Blvd.

City Florence State AL Zip Code 35630

Purpose of Disbursement

Constituent expense

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8025

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

201.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)

3225.22

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 131 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Citgo

Mailing Address 105 Broadway

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8057

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

7.07

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8050

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

26.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8055

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

37.45

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 132 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8049

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

33.85

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8042

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

37.15

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8041

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

6.50

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 133 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8036

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

34.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8017

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

37.50

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8024

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

18.15

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 134 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Haute on the Hill

Mailing Address Rayburn House Office Bldg.
B339B

City Washington State DC Zip Code 20515

Purpose of Disbursement

Reception cost

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8046

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

1516.72

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hertz Car Rental

Mailing Address 544 Airport Rd.

City Warwick State RI Zip Code 02886

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8020

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

329.65

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Legal Seafoods

Mailing Address 2001 International Dr.

City McLean State VA Zip Code 22102

Purpose of Disbursement

Meeting expense

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8028

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

51.17

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 135 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8039

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

29.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8034

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

26.65

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 2525 East Main Rd.

City Portsmouth State RI Zip Code 02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8058

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

17.65

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 136 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8035

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

35.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8022

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

24.75

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8033

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

37.15

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 137 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8031

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

37.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address P.O. Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel credit

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8043

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

-189.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address P.O. Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel credit

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8044

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

-189.20

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 138 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 1007 Ten Rod Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8054

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	5	

Amount of Each Disbursement this Period

21.23

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1007 Ten Rod Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8027

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	5	

Amount of Each Disbursement this Period

20.27

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AirwaysMailing Address Crystal Park 4
3345 Crystal Dr.City
ArlingtonState
VAZip Code
22227Purpose of Disbursement
Travel

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8016

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	4	/	2	0	5	

Amount of Each Disbursement this Period

217.70

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 139 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Verio Web Hosting

Mailing Address 1800 Old Okeechobee Rd.

City	State	Zip Code
West Palm Beach	FL	33409

Purpose of Disbursement
Website

Candidate Name

001
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8026

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	5

Amount of Each Disbursement this Period

99.95

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8074

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	5

Amount of Each Disbursement this Period

4861.35

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

Full Name (Last, First, Middle Initial)

C. Cape Air

Mailing Address 660 Barnstable Rd.

City	State	Zip Code
Hyannis	MA	02601

Purpose of Disbursement
Travel

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8079

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	3		2	0	0	5

Amount of Each Disbursement this Period

134.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

4861.35

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 140 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Cape Air

Mailing Address 660 Barnstable Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8078

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

156.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cape Air

Mailing Address 660 Barnstable Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8076

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

156.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cape Air

Mailing Address 660 Barnstable Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8077

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

156.95

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 141 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Cape Codder

Mailing Address 1225 Iyannough Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8083

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

223.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cape Codder

Mailing Address 1225 Iyannough Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8082

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

217.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Sheraton Grand Hotel

Mailing Address 818 15th St.

City Sacramento State CA Zip Code 95814

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8075

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

840.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 142 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Someone's in the Kitchen

Mailing Address 5973 Reseda Blvd.

City Tarzana State CA Zip Code 91356

Purpose of Disbursement

Reception cost

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8081

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

2925.60

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8110

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

1175.32

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

Full Name (Last, First, Middle Initial)

C. Hotel Zaza

Mailing Address 2332 Leonard St.

City Dallas State TX Zip Code 75201

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8117

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

536.44

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1175.32

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 PageFOR LINE NUMBER:
(check only one)

PAGE 143 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Hotel Zaza

Mailing Address 2332 Leonard St.

City	State	Zip Code
Dallas	TX	75201

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Transaction ID: D8116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	5	/	2	0	0	5

Amount of Each Disbursement this Period

638.88

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Transaction ID: D8111

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

1939.84

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

Full Name (Last, First, Middle Initial)

C. Hilton Hotel

Mailing Address 10330 Natural Bridge Rd.

City	State	Zip Code
Saint Louis	MO	63134

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Transaction ID: D8113

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

364.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1939.84

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 PageFOR LINE NUMBER:
(check only one)

PAGE 144 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City	State	Zip Code
Los Angeles	CA	90067

Purpose of Disbursement
Travel

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8115

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

640.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City	State	Zip Code
Los Angeles	CA	90067

Purpose of Disbursement
Travel

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8114

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

476.82

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Radisson Hotel

Mailing Address 287 Iyannough Rd.

City	State	Zip Code
Hyannis	MA	02601

Purpose of Disbursement
Travel

Candidate Name

002
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Transaction ID: D8112

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	1		2	0	0	5

Amount of Each Disbursement this Period

458.54

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 145 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8130

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

9357.17

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

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4255 Amon Carter Blvd.

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8150

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

408.90

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4255 Amon Carter Blvd.

City
Fort Worth

State
TX

Zip Code
76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8148

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

239.70

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

9357.17

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 146 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4255 Amon Carter Blvd.

City State Zip Code
Fort Worth TX 76155

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8143

Date of Disbursement

/ /

Amount of Each Disbursement this Period

268.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City State Zip Code
Washington DC 20003

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8170

Date of Disbursement

/ /

Amount of Each Disbursement this Period

338.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City State Zip Code
Washington DC 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8145

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 147 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8179

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

100.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8162

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

50.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8155

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

75.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 148 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Citgo

Mailing Address 105 Broadway

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8164

Date of Disbursement

/ /

Amount of Each Disbursement this Period

35.15

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8158

Date of Disbursement

/ /

Amount of Each Disbursement this Period

23.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Cumberland Farms

Mailing Address 1812 E Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8146

Date of Disbursement

/ /

Amount of Each Disbursement this Period

31.65

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 149 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8142

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

286.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8151

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

311.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8160

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

458.40

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 150 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8161

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

458.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8171

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

531.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8144

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

75.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 151 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Delta Airlines

Mailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8172

Date of Disbursement

/ /

Amount of Each Disbursement this Period

531.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hilton Hotel

Mailing Address 10330 Natural Bridge Rd.

City Saint Louis State MO Zip Code 63134

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8223

Date of Disbursement

/ /

Amount of Each Disbursement this Period

364.36

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City Los Angeles State CA Zip Code 90067

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8225

Date of Disbursement

/ /

Amount of Each Disbursement this Period

476.82

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 152 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City Los Angeles State CA Zip Code 90067

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8224

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

640.12

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Radisson Hotel

Mailing Address 287 Iyannough Rd.

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8222

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

458.54

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 2525 East Main Rd.

City Portsmouth State RI Zip Code 02871

Purpose of Disbursement

Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8163

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

20.55

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 153 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Shell

Mailing Address 207 East Main Rd.

City
Middletown

State
RI

Zip Code
02842

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8157

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

27.25

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8177

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

210.90

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8178

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

259.60

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 154 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Staples

Mailing Address 551 North Main St.

City
ProvidenceState
RIZip Code
02904

Purpose of Disbursement

Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8175

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

9.90

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Staples

Mailing Address 1025 Wayne Ave.

City
ChambersburgState
PAZip Code
17201

Purpose of Disbursement

Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8165

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

106.49

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address 1007 Ten Rod Rd.

City
North KingstownState
RIZip Code
02852

Purpose of Disbursement

Office supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8152

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	2	/	2	0	0	5

Amount of Each Disbursement this Period

18.51

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 155 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8149

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

163.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. XO Cafe

Mailing Address 125 N Main St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Reception cost

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8173

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

1641.31

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8199

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

10528.07

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

SUBTOTAL of Disbursements This Page (optional)

10528.07

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 PageFOR LINE NUMBER:
(check only one)

PAGE 156 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Hilton Hotel

Mailing Address 10330 Natural Bridge Rd.

City
Saint LouisState
MOZip Code
63134

Purpose of Disbursement

Travel credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8229

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	5

Amount of Each Disbursement this Period

-364.36

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City
Los AngelesState
CAZip Code
90067

Purpose of Disbursement

Travel credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8228

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	5

Amount of Each Disbursement this Period

-640.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Loews Hotel

Mailing Address 1801 Avenue of the Stars

City
Los AngelesState
CAZip Code
90067

Purpose of Disbursement

Travel credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8227

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	5

Amount of Each Disbursement this Period

-476.82

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 157 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Marriott Marquis

Mailing Address 1535 Broadway

City New York State NY Zip Code 10036

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8211

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

47.85

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Marriott Marquis

Mailing Address 1535 Broadway

City New York State NY Zip Code 10036

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8210

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

248.45

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Park City Mountain Resort

Mailing Address 1310 Lowell Ave.

City Park City State UT Zip Code 84068

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8217

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

10167.92

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 158 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Postmaster

Mailing Address 90 Power Rd.

City
Pawtucket

State
RI

Zip Code
02860

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8216

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

111.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Radisson Hotel

Mailing Address 287 Iyannough Rd.

City
Hyannis

State
MA

Zip Code
02601

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8215

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

229.27

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Radisson Hotel

Mailing Address 287 Iyannough Rd.

City
Hyannis

State
MA

Zip Code
02601

Purpose of Disbursement
Travel credit

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8226

Date of Disbursement

12 / 21 / 2005

Amount of Each Disbursement this Period

-458.54

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 159 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Seaport Hotel

Mailing Address 1 Seaport Ln.

City
BostonState
MAZip Code
02210Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8213

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	5

Amount of Each Disbursement this Period

308.85

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Seaport Hotel

Mailing Address 1 Seaport Ln.

City
BostonState
MAZip Code
02210Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8212

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	5

Amount of Each Disbursement this Period

219.05

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Sheraton Manhattan

Mailing Address 790 7th Ave.

City
New YorkState
NYZip Code
10019Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8221

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	1		2	0	0	5

Amount of Each Disbursement this Period

478.54

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 160 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sheraton Manhattan

Mailing Address 790 7th Ave.

City
New YorkState
NYZip Code
10019Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8220

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	5

Amount of Each Disbursement this Period

521.32

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address P.O. Box 1270

City
NewarkState
NJZip Code
07101Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8203

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

4748.30

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

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City
NewarkState
NJZip Code
07101Purpose of Disbursement
Dues

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8240

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

35.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional)

4748.30

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 161 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Biltmore Hotel

Mailing Address 11 Dorrance St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8247

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

168.37

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Capital Grille

Mailing Address 601 Pennsylvania Ave, NW

City
Washington

State
DC

Zip Code
20004

Purpose of Disbursement
Meeting expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8264

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

47.05

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Carey Limousine

Mailing Address P.O. Box 631414

City
Baltimore

State
MD

Zip Code
21263

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8259

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

236.20

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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 162 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Carey Limousine

Mailing Address P.O. Box 631414

City Baltimore State MD Zip Code 21263

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8253

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

350.88

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8257

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

100.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Chimauro Restaurant

Mailing Address 368 Main St.

City Park City State UT Zip Code 84060

Purpose of Disbursement

Reception cost

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8260

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

1935.47

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 163 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Continental Airlines

Mailing Address P.O. Box 4607

City
HoustonState
TXZip Code
77210

Purpose of Disbursement

Travel credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8249

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	5

Amount of Each Disbursement this Period

-404.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Continental Airlines

Mailing Address P.O. Box 4607

City
HoustonState
TXZip Code
77210

Purpose of Disbursement

Travel credit

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8250

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	5

Amount of Each Disbursement this Period

-404.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Delta AirlinesMailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.City
AtlantaState
GAZip Code
30309

Purpose of Disbursement

Travel

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8261

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	5

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 164 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Delta AirlinesMailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8265

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

206.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Delta AirlinesMailing Address Atlantic Center Suite 4900
1201 W. Peachtree St.

City Atlanta State GA Zip Code 30309

Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8266

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

700.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Network Solutions

Mailing Address 10 Azalea Dr.

City Drums State PA Zip Code 18222

Purpose of Disbursement
Website

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8263

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

550.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)

0.00

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 165 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Postmaster

Mailing Address 1400 L St. SE

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8270

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

148.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Shell

Mailing Address 2525 East Main Rd.

City
Portsmouth

State
RI

Zip Code
02871

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8233

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

35.05

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Southwest Airlines

Mailing Address P.O. Box 36611

City
Dallas

State
TX

Zip Code
75235

Purpose of Disbursement
Travel credit

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8251

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

-104.70

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 166 / 170

☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. US Airways

Mailing Address Crystal Park 4
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8245

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

262.70

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Verio Web Hosting

Mailing Address 1800 Old Okeechobee Rd.

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement
Website

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8235

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

149.85

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Verio Web Hosting

Mailing Address 1800 Old Okeechobee Rd.

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement
Website

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8255

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

99.95

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

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 167 / 170

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

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)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8204

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	0	5

Amount of Each Disbursement this Period

44.60

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

SUBTOTAL of Disbursements This Page (optional)

44.60

TOTAL This Period (last page this line number only)

126096.58

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 168 / 170

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Nam Suk Hoon

Mailing Address 3932 Wilshire Blvd. Suite 206

City Los Angeles State CA Zip Code 90010

Purpose of Disbursement

Refund of contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8094

Date of Disbursement

10 / 25 / 2005

Amount of Each Disbursement this Period

2000.00

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

Full Name (Last, First, Middle Initial)

B. Mooretown Rancheria

Mailing Address 1 Alverda Dr.

City Oroville State CA Zip Code 95966

Purpose of Disbursement

Void check issued prior period

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D8271

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

-500.00

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

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

1500.00

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

PAGE 169 / 170

<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)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Transfer to a National Political Party

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8187

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	5

Amount of Each Disbursement this Period

20000.00

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

Full Name (Last, First, Middle Initial)

B. Edward J. McElroy Scholarship Fund

Mailing Address 99 Bald Hill Rd.

City
CranstonState
RIZip Code
02920Purpose of Disbursement
Donation

Candidate Name

012
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7885

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	7	/	2	0	0	5

Amount of Each Disbursement this Period

250.00

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

Full Name (Last, First, Middle Initial)

C. No On 77

Mailing Address 8665 Wilshire Blvd. #306

City
Beverly HillsState
CAZip Code
90211Purpose of Disbursement
Contribution

Candidate Name

012
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7979

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	2	4	/	2	0	0	5

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)

21250.00

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 170 / 170

☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Providence Center

Mailing Address 951 N. Main St.

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8067

Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

1500.00

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

Full Name (Last, First, Middle Initial)

B. Slater Mill Historic Site

Mailing Address P.O. Box 696

City
Pawtucket

State
RI

Zip Code
02862

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D8093

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

250.00

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

Full Name (Last, First, Middle Initial)

C. United Way

Mailing Address 229 Waterman St.

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D7990

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

1500.00

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

SUBTOTAL of Disbursements This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

24500.00