

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

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

Johnson for Congress Committee

ADDRESS (number and street)  
▼

P. O. Box 1986

☐Check if different  
than previously  
reported. (ACC)

New Britain

CT

06050

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00145607

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

CT

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☒

October 15 Quarterly Report (Q3)

☐

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

07

01

2006

through

09

30

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

John Eveleth

Signature of Treasurer

Electronically Filed by John Eveleth

Date

04

06

2007

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period:

From:

M M  
0 7D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 9D D  
3 0Y Y Y Y  
2 0 0 6

	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)).....	880806.74	3408283.70
(b) Total Contribution Refunds (from Line 20(d)).....	31600.00	47500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	849206.74	3360783.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	2358901.87	3428118.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	26.96	1547.80
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2358874.91	3426570.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1087981.79	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

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

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	6

## 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).....

321275.00

1385620.55

(ii) Unitemized.....

22612.00

83557.90

(iii) TOTAL of contributions

343887.00

1469178.45

from individuals..... ▶

6800.00

13294.00

(b) Political Party Committees.....

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

530119.74

1925811.25

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

880806.74

3408283.70

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

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

0.00

36096.87

## 13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

26.96

1547.80

## 15. OTHER RECEIPTS

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

6755.42

43692.86

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

887589.12

3489621.23

# 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.....	2358901.87	3428118.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	2400.00	7800.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	29200.00	39700.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	31600.00	47500.00
21. OTHER DISBURSEMENTS.....	50100.00	97695.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	2440601.87	3573313.29

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2640994.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	887589.12
25. SUBTOTAL (add Line 23 and Line 24).....	3528583.66
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	2440601.87
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1087981.79

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

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

FOR LINE NUMBER: PAGE 5 / 414

(check only one)

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

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

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) 21st Century PAC Mailing Address 2052 Lake Audobon Ct., Ste. 300 City State Zip Code Reston VA 20191 FEC ID number of contributing federal political committee. <b>C</b> C00315747 Name of Employer 21st Century Majority Fund PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36041 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Abbott Laboratories PAC Mailing Address Ms. Joanna Burton 1399 New York Ave, NW, Suite 200 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00040279 Name of Employer Abbott Laboratories PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 8000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35996 Amount of Each Receipt this Period 3000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Advanced Medical Technology Assn. Mailing Address Ms. Megan Ivory 1200 G Street, NW, Suite 400 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00340356 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35925 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

9000.00

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 6 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** Affiliated Computer Services Good Govt

Mailing Address PO Box 219002

City State Zip Code  
 Dallas TX 75221

FEC ID number of contributing  
federal political committee.**C** C00248245

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
0	9		2	0		2	0	0	6

Transaction ID: 60927.C35415

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** Agri-Mark Inc. Leg. & Educ. Comm. PAC

Mailing Address Mr. Nathan Cushman  
100 Milk Street, Office Park

City State Zip Code  
 Methuen MA 01844

FEC ID number of contributing  
federal political committee.**C** C00141242

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 61006.C35874

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** Air Line Pilots Assn PAC

Mailing Address Mr. Frank J. Voyack  
1625 Massachusetts Ave, NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.**C** C00035451Name of Employer  
Air Line Pilots Assoc PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	0	6

Transaction ID: 60830.C35278

Amount of Each Receipt this Period

2500.00

Receipt

☐ 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 7 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Allete PAC

Mailing Address 30 West Superior Street

City State Zip Code  
Duluth MN 55802

FEC ID number of contributing  
federal political committee.

**C** C00142489

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36130

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Alston & Bird PAC

Mailing Address 601 Pennsylvania Ave. NW, 10th Fl.

City State Zip Code  
Washington DC 20004-2601

FEC ID number of contributing  
federal political committee.

**C** C00395723

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36127

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Altior PAC

Mailing Address 7575 East Fulton Road

City State Zip Code  
Ada MI 49355

FEC ID number of contributing  
federal political committee.

**C** C00034884

Name of Employer  
AMWAY PAC

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  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35356

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 8 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** Am Academy of Ophthalmology Inc. PAC

Mailing Address Ms. Catherine Cohen  
 1101 Vermont Ave., NW, Suite 700

City State Zip Code  
 Washington DC 20005-3570

FEC ID number of contributing  
 federal political committee. **C** C00196246

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
 7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35068

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** Am Academy of Ophthalmology Inc. PAC

Mailing Address Ms. Catherine Cohen  
 1101 Vermont Ave., NW, Suite 700

City State Zip Code  
 Washington DC 20005-3570

FEC ID number of contributing  
 federal political committee. **C** C00196246

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
 8000.00

Date of Receipt

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

Transaction ID: 60927.C35506

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** Am Academy of Ophthalmology Inc. PAC

Mailing Address Ms. Catherine Cohen  
 1101 Vermont Ave., NW, Suite 700

City State Zip Code  
 Washington DC 20005-3570

FEC ID number of contributing  
 federal political committee. **C** C00196246

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
 10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36023

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 / 414

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** Am. Soc. for Therapeutic Radiology & Onc

Mailing Address Ms. Laura Thevenot  
12500 Fair Lakes Circle, Suite 375

City State Zip Code  
Fairfax VA 22033-3863

FEC ID number of contributing  
federal political committee. **C** C00384602

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
0 9		3 0		2 0 0 6

Transaction ID: 61009.C36125

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** Am. Society of Consultant Pharmacists

Mailing Address 1321 Duke Street

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee. **C** C00199547

Name of Employer Occupation  
Amer Soc of Consultant Ph-  
armac

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

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35581

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** Amer Acad of Dermatology PAC

Mailing Address Mr. Robb Bohannon  
1350 I Street, NW, Suite 880

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00359539

Name of Employer Occupation  
Amer Acad of Dermatology  
PAC

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

Election Cycle-to-Date ▼  
7000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 9		3 0		2 0 0 6

Transaction ID: 61006.C35997

Amount of Each Receipt this Period

5000.00

Receipt

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

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

7000.00

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 10 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Academy Otolaryngology PACMailing Address Mr. John R. Williams  
1 Prince Street

City	State	Zip Code
Alexandria	VA	22314-3357

FEC ID number of contributing  
federal political committee.**C** C00306449Name of Employer  
Amer Academy Otolaryngology PA

Occupation

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

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 9	/	0 7	/	2 0 0 6

Transaction ID: 60927.C35359

Amount of Each Receipt this Period

3000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Assn of Clinical Endocrinologists

Mailing Address 1000 Riverside Avenue, Suite 205

City	State	Zip Code
Jacksonville	FL	32204

FEC ID number of contributing  
federal political committee.**C** C00368365Name of Employer  
AACEPAC, Inc.

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 9	/	2 0 0 6

Transaction ID: 61006.C35875

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Assn of Orthodontists PA

Mailing Address 401 North Lindbergh Blvd.

City	State	Zip Code
St. Louis	MO	63141

FEC ID number of contributing  
federal political committee.**C** C00293910Name of Employer  
American Association of  
Orthod

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
0 9	/	3 0	/	2 0 0 6

Transaction ID: 61006.C36002

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 11 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Assn of Orthodontists PA

Mailing Address 401 North Lindbergh Blvd.

City State Zip Code  
St. Louis MO 63141
FEC ID number of contributing  
federal political committee.**C** C00293910Name of Employer  
American Association of  
Orthod

Occupation

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

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35940

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Benefits Council PAC
Mailing Address Mr. Jim Klein  
1212 New York Ave, NW, Suite 1250

City State Zip Code  
Washington DC 20005-3987
FEC ID number of contributing  
federal political committee.**C** C00153171Name of Employer  
American Benefits Council  
PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35585

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Chiropractic Assn PAC
Mailing Address Ms. Kim Krocher  
1701 Clarendon Blvd.

City State Zip Code  
Arlington VA 22209
FEC ID number of contributing  
federal political committee.**C** C00102764Name of Employer  
American Chiropractic Ass-  
oc.

Occupation

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

Election Cycle-to-Date ▼

4750.00

Date of Receipt

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

Transaction ID: 60927.C35466

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 12 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Council of Life Insurers

Mailing Address Ms. Kate Smith

101 Constitution Avenue, N.W.

City

State

Zip Code

Washington

DC

20001

FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: 61006.C35625

Amount of Each Receipt this Period

3000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Electric Power PAC

Mailing Address Mr. Tony Cavanagh

801 Pennsylvania Ave, NW, Ste 320

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing  
federal political committee.**C** C00096842Name of Employer  
Amer Electric Power PAC

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
0	9		3	0		2	0	0	6

Transaction ID: 61006.C36012

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Institute of Certified Public Acct.

Mailing Address Mr. Tom Higginbotham

1455 Pennsylvania Ave, NW, Ste 400

City

State

Zip Code

Washington

DC

20004-1081

FEC ID number of contributing  
federal political committee.**C** C00077321Name of Employer  
AICPA PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID: 61006.C35893

Amount of Each Receipt this Period

2500.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Occupational Therapy Assn PAC

Mailing Address Ms. Christina A. Metzler

4720 Montgomery Lane, Box 31220

City

State

Zip Code

Bethesda

MD

20824-1220

FEC ID number of contributing  
federal political committee.

**C** C00089086

Name of Employer  
American Occupational The-  
rapy

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35991

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Optometric Assn PAC

Mailing Address Ms. Noel Brazil

1505 Prince Street, Suite 300

City

State

Zip Code

Alexandria

VA

22314

FEC ID number of contributing  
federal political committee.

**C** C00024968

Name of Employer  
American Optometric Assoc  
PAC

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  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35069

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Optometric Assn PAC

Mailing Address Ms. Noel Brazil

1505 Prince Street, Suite 300

City

State

Zip Code

Alexandria

VA

22314

FEC ID number of contributing  
federal political committee.

**C** C00024968

Name of Employer  
American Optometric Assoc  
PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35600

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Pharmacists Assn PAC

Mailing Address Ms. Susan Bishop  
2215 Constituion Avenue, N.W.

City State Zip Code  
Washington DC 20037

FEC ID number of contributing federal political committee. **C** C00193854

Name of Employer  
Amer Pharmacists Assn PAC

Occupation

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

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35357

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Soc of Anesthesiologists PAC

Mailing Address Mr. Manuel Bonilla  
1101 Vermont Ave, NW, Suite 606

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36036

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Speech-Language-Hear Assn PAC

Mailing Address Ms. Stephanie Reeves  
444 North Capitol St, NW, Suite 71

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00210666

Name of Employer  
American Speech Associati-  
on PA

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35987

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 15 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amer Speech-Language-Hear Assn PAC Mailing Address Ms. Stephanie Reeves 444 North Capitol St, NW, Suite 71 City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. <b>C</b> C00210666 Name of Employer American Speech Associati-on PA Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00	Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61009.C36070 Amount of Each Receipt this Period 3000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Amer Speech-Language-Hear Assn PAC Mailing Address Ms. Stephanie Reeves 444 North Capitol St, NW, Suite 71 City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. <b>C</b> C00210666 Name of Employer American Speech Associati-on PA Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 6000.00	Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61009.C36064 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Amer Trucking Assn PAC Mailing Address Jackie Kelly, Jr. 430 First Street S. E. City Washington State DC Zip Code 20003 FEC ID number of contributing federal political committee. <b>C</b> C00002881 Name of Employer Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00	Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35604 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> 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 16 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Academy of Family Physicians

Mailing Address Mr. Kevin J. Burke

2021 Massachusetts Ave., NW

City

Washington

State

DC

Zip Code

20036-1011

FEC ID number of contributing  
federal political committee.**C** C00411553

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
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35993

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** American Ambulance Assn. Federal PAC

Mailing Address Government Affairs Director

8201 Greensboro Drive, Suite 300

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.**C** C00168070Name of Employer  
American Ambulance Associ-  
ation

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID: 60927.C35386

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** American Ambulance Assn. Federal PAC

Mailing Address Government Affairs Director

8201 Greensboro Drive, Suite 300

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.**C** C00168070Name of Employer  
American Ambulance Associ-  
ation

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	8		2	0	0	6

Transaction ID: 61006.C35805

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Bakers Association PAC

Mailing Address 1111 14th St., NE, Suite 300

City State Zip Code  
Washington DC 20005
FEC ID number of contributing  
federal political committee.**C** C00016386Name of Employer  
American Bakers Associati-  
on PA

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36112

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** American College of Radiology Assn.Mailing Address Dr. Melanie Young  
1891 Preston White Drive
City State Zip Code  
Reston VA 20191-4397
FEC ID number of contributing  
federal political committee.**C** C00343459

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 Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35606

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** American College of Radiology Assn.Mailing Address Dr. Melanie Young  
1891 Preston White Drive
City State Zip Code  
Reston VA 20191-4397
FEC ID number of contributing  
federal political committee.**C** C00343459

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36129

Amount of Each Receipt this Period

4000.00

Receipt

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 18 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Dental PAC Mailing Address Mr. Michael Graham 1111 14th Street, NW, Suite 1200 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00000729 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 8000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35467 Amount of Each Receipt this Period 3000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) American Dental PAC Mailing Address Mr. Michael Graham 1111 14th Street, NW, Suite 1200 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00000729 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 9000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35739 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) American Medical Association PAC Mailing Address Government Affairs Director 1101 Vermont Avenue, N.W. City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00000422 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36071 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

9000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Medical Group PAC

Mailing Address 1422 Duke Street

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00408120

Name of Employer  
American Medical Group PAC

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  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35169

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** American Medical Response PAC

Mailing Address Government Affairs Director  
 6200 S. Syracuse Way, Ste. 200

City State Zip Code  
 Englewood CO 80111

FEC ID number of contributing  
federal political committee.

**C** C00389585

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  
 0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35804

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** American Nurses Assn PAC

Mailing Address Ms. Rose Gonzales  
 600 Maryland Ave, SW, Ste 100 West

City State Zip Code  
 Washington DC 20024-2571

FEC ID number of contributing  
federal political committee.

**C** C00017525

Name of Employer  
American Nurses Associati-  
on PA

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 3 1 / 2 0 0 6

Transaction ID: 60927.C35306

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 20 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Society of Plastic Surgeons

Mailing Address Mr. Jon Kent  
1990 M Street, NW, Suite 340

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00249342

Name of Employer  
American Society of Plastic Surgeons

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  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35273

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** American Society of Plastic Surgeons

Mailing Address Mr. Jon Kent  
1990 M Street, NW, Suite 340

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00249342

Name of Employer  
American Society of Plastic Surgeons

Occupation

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

Election Cycle-to-Date ▼  
7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36033

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** American Success

Mailing Address 1155 21st St., NW, Ste. 300

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00336644

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35784

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Surgical Hospital Assn. Inc.

Mailing Address Government Affairs Director  
910 East 20th Street

City State Zip Code  
Sioux Falls SD 57105

FEC ID number of contributing  
federal political committee.

**C** C00394163

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35619

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** AmerisourceBergen Corp PAC

Mailing Address 1300 Morris Drive, Suite 100

City State Zip Code  
Chesterbrook PA 19087

FEC ID number of contributing  
federal political committee.

**C** C00400929

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34921

Amount of Each Receipt this Period

4000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Arch Chemicals Inc. Govt Participation

Mailing Address Ms. Courtney Johnson  
501 Merritt Seven

City State Zip Code  
Norwalk CT 06856

FEC ID number of contributing  
federal political committee.

**C** C00345926

Name of Employer  
Arch Chemicals

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  
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35876

Amount of Each Receipt this Period

500.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Areva, Cogema, Framatome ANP PAC

Mailing Address Ms. Laurie Harrison  
4800 Hampden Lane, Suite 1100

City State Zip Code  
Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C** C00395285

Name of Employer  
Areva, Cogema

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36132

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Asea Brown Boveri Employees Fund

Mailing Address Mr. Bruce Talley  
555 12th Street, NW, Ste. 350 Nort

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00041947

Name of Employer  
COMBUSTION ENGINEERI

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35571

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Assn for the Adv of Psychology PAC

Mailing Address Dr. Stephan Pfeiffer  
P.O. Box 38129

City State Zip Code  
Colorado Springs CO 80937-8129

FEC ID number of contributing  
federal political committee.

**C** C00002956

Name of Employer  
Assoc for the Adv of Psyc-  
holog

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35738

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 23 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Assn Manufacturing Tech Machine Tool PACMailing Address Mr. James Mack  
7901 Westpark Drive

City	State	Zip Code
Mc Lean	VA	22102-4206

FEC ID number of contributing  
federal political committee. **C** C00034173

Name of Employer Occupation

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

 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 8		2 4		2 0 0 6

Transaction ID: 60830.C35271

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Assn of Kentucky Fried Chicken Franchise

Mailing Address PO Box 26366

City	State	Zip Code
Alexandria	VA	22313

FEC ID number of contributing  
federal political committee. **C** C00412098

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
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35614

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Assurant Inc. PACMailing Address Government Affairs Director  
501 W. Michigan St., PO Box 3050

City	State	Zip Code
Milwaukee	WI	53201-3050

FEC ID number of contributing  
federal political committee. **C** C00185694

Name of Employer Occupation

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

 Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 8		3 1		2 0 0 6

Transaction ID: 60927.C35310

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 24 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** AT&T Inc. Federal PAC

Mailing Address Government Affairs Director  
175 E. Houston, Rm. 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4791.00

Date of Receipt

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

Transaction ID: 61006.C35889

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Automotive Free Internatl Trade PAC

Mailing Address Government Affairs Director  
1625 Prince Street, Suite 225

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00250399

Name of Employer  
Automotive Free Internati-  
onal

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35385

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** AXA Equitable Life Insurance Co. PAC

Mailing Address 1290 Avenue of the Americas

City State Zip Code  
New York NY 10104

FEC ID number of contributing  
federal political committee.

**C** C00161901

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35786

Amount of Each Receipt this Period

5000.00

Receipt

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

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

8000.00

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



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

FOR LINE NUMBER: PAGE 25 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) B&D Sagamore PAC Mailing Address Ms. Lisa Levin 805 15th Street, NW, Ste 700 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00386904 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 9 / 2 7 / 2 0 0 6           </div> <b>Transaction ID:</b> 61006.C35565 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Baker Botts Bluebonnet Fund Mailing Address 910 Lousiana ST. Suite 3000 City State Zip Code Houston TX 77002 FEC ID number of contributing federal political committee. <b>C</b> C00077552 Name of Employer Occupation Baker Botts Bluebonnet Fund Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 9 / 2 7 / 2 0 0 6           </div> <b>Transaction ID:</b> 61006.C35775 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) BASF Corp. Employees PAC Mailing Address 3000 Continental Drive North City State Zip Code Budd Lake NJ 07828 FEC ID number of contributing federal political committee. <b>C</b> C00340075 Name of Employer Occupation BASF Corp. PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">3000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 9 / 3 0 / 2 0 0 6           </div> <b>Transaction ID:</b> 61006.C35947 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">3000.00</div> Receipt <input type="checkbox"/> 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 26 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.** Baxter Healthcare Co PAC

Full Name (Last, First, Middle Initial)

Baxter Healthcare Co PAC

Mailing Address Ms. Angela McLaurin  
800 Connecticut Ave, NW, Ste 1100

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00117838

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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35890

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.** Bayer Corp PAC

Full Name (Last, First, Middle Initial)

Bayer Corp PAC

Mailing Address Dr. Ron Docksai  
1275 Pennsylvania Ave, NW, Ste 801

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00281162

Name of Employer  
Bayer Corp PAC

Occupation

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

Election Cycle-to-Date ▼  
 7000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35104

Amount of Each Receipt this Period

1000.00

Receipt

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

## **C.** Beverly Enterprises Inc. (AC)

Full Name (Last, First, Middle Initial)

Beverly Enterprises Inc. (AC)

Mailing Address Mr. Jack McDonald  
1250 H Street, NW, Ste 555

City State Zip Code  
Washington DC 20005-3965

FEC ID number of contributing federal political committee. **C** C00346346

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
 9000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35587

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Bristol-Myers Squibb Co Employee PAC

Mailing Address 345 Park Avenue  
11th floor

City State Zip Code  
New York NY 10154

FEC ID number of contributing  
federal political committee.

**C** C00035675

Name of Employer  
Bristol-Myers Squibb Co  
PAC

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  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35111

Amount of Each Receipt this Period

5000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Brownstein Hyatt & Farber PAC

Mailing Address 410 17th St., 22nd Floor

City State Zip Code  
Denver CO 80202

FEC ID number of contributing  
federal political committee.

**C** C00390583

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36015

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Bryan Cave LLP PAC

Mailing Address 700 13th St., NW, Ste. 700

City State Zip Code  
Washington DC 20005-6619

FEC ID number of contributing  
federal political committee.

**C** C00332643

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35583

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

**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 28 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Buchan Ingersoll Professional Corp. Mailing Address 1 Oxford Center, 20th Fl. 301 Gran City State Zip Code Pittsburgh PA 15219-1410 FEC ID number of contributing federal political committee. <b>C</b> C00195388 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2000.00</div>		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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 61006.C35776 Amount of Each Receipt this Period <div style="text-align: right;">2000.00</div> Receipt <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	0	9		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													
<b>B.</b> Full Name (Last, First, Middle Initial) Cablevision Systems Corporation PAC Mailing Address 1111 Stewart Avenue City State Zip Code Bethpage NY 11714 FEC ID number of contributing federal political committee. <b>C</b> C00197863 Name of Employer Occupation Cablevision Systems PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2000.00</div>		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>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60830.C35105 Amount of Each Receipt this Period <div style="text-align: right;">2000.00</div> Receipt <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	0	8		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	6		2	0	0	6													
<b>C.</b> Full Name (Last, First, Middle Initial) Cablevision Systems Corporation PAC Mailing Address 1111 Stewart Avenue City State Zip Code Bethpage NY 11714 FEC ID number of contributing federal political committee. <b>C</b> C00197863 Name of Employer Occupation Cablevision Systems PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">7000.00</div>		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>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60830.C35110 Amount of Each Receipt this Period <div style="text-align: right;">5000.00</div> Receipt <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	0	8		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	6		2	0	0	6													

**SUBTOTAL** of Receipts This Page (optional) .....**9000.00****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 / 414

(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

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

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Campbell for Congress Mailing Address 4590 MacArthur Blvd., Ste. 500 City State Zip Code Newport Beach CA 92660 FEC ID number of contributing federal political committee. <b>C</b> C00412312 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 Y</div> <div style="border: 1px solid black; padding: 2px;">0 9 / 3 0 / 2 0 0 6</div> <b>Transaction ID:</b> 61006.C36007 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Cardiology Advocacy Alliance PAC Mailing Address 347 Vesclub Drive City State Zip Code Birmingham AL 35216 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 Y</div> <div style="border: 1px solid black; padding: 2px;">0 9 / 3 0 / 2 0 0 6</div> <b>Transaction ID:</b> 61009.C36124 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) CARE PAC Mailing Address 228 S. Washington St., Ste. 115 City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. <b>C</b> C00389668 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">0 8 / 0 3 / 2 0 0 6</div> <b>Transaction ID:</b> 60830.C35170 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2000.00</div> Receipt <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 30 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Caremark RX Inc. Employees PACMailing Address Government Affairs Director  
2500 Legacy Dr., Ste 212City State Zip Code  
Frisco TX 75034FEC ID number of contributing  
federal political committee.**C** C00384818

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 Y  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35109

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.** Full Name (Last, First, Middle Initial)  
Ceridian Corporation PACMailing Address Mr. James OConnell  
1300 I Street, NW, Ste 420ECity State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.**C** C00344127Name of Employer  
Ceridian Corporation PAC

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35513

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.** Full Name (Last, First, Middle Initial)  
CH2M Hill Companies PACMailing Address Ms. Debbie Cohen  
555 11th Street, NW, Ste 525City State Zip Code  
Washington DC 20004FEC ID number of contributing  
federal political committee.**C** C00143305Name of Employer  
CH2M Hill Companies PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35618

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Charles Boustany Jr. MD for Congress Inc

Mailing Address PO Box 80126

City State Zip Code  
Lafayette LA 70598

FEC ID number of contributing  
federal political committee. **C** C00394866

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36032

Amount of Each Receipt this Period

2100.00

Receipt

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

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

Mailing Address Mr. Jeff Levey  
1101 Pennsylvania Ave, N.W. Ste 10

City State Zip Code  
Washington DC 20004-2514

FEC ID number of contributing  
federal political committee. **C** C00008474

Name of Employer Occupation  
Citigroup Inc. PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35790

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Conaway for Congress

Mailing Address PO Box 51272

City State Zip Code  
Midland TX 79710

FEC ID number of contributing  
federal political committee. **C** C00383828

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36017

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 32 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Conaway for Congress

Mailing Address PO Box 51272

City State Zip Code  
 Midland TX 79710

FEC ID number of contributing  
federal political committee.

**C** C00383828

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36001

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Conservative & Rep.Together Equal Result

Mailing Address 7315 Wisconsin Ave., Ste. 705E

City State Zip Code  
 Bethesda MD 20814

FEC ID number of contributing  
federal political committee.

**C** C00427401

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36014

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Constellation Energy Group Inc. Federal

Mailing Address Government Affairs Director  
 750 E. Pratt Street, 5th Floor

City State Zip Code  
 Baltimore MD 21202

FEC ID number of contributing  
federal political committee.

**C** C00041376

Name of Employer  
 Constellation Energy Feder-  
 al PA

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36010

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Consumer Healthcare Products Assn PAC

Mailing Address Mr. Kevin J. Kraushaar  
1150 Connecticut Ave, NW, Ste 1200

City State Zip Code  
Washington DC 20036-4193

FEC ID number of contributing federal political committee. **C** C00040584

Name of Employer  
Consumer Healthcare Products A

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35591

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Continuing A Majority PAC

Mailing Address Government Affairs Director  
5915 Eastman Ave., Ste. 100

City State Zip Code  
Midland MI 48640

FEC ID number of contributing federal political committee. **C** C00350462

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35789

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Continuing A Majority PAC

Mailing Address Government Affairs Director  
5915 Eastman Ave., Ste. 100

City State Zip Code  
Midland MI 48640

FEC ID number of contributing federal political committee. **C** C00350462

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36003

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A. Continuing A Majority PAC**

Full Name (Last, First, Middle Initial)

Mailing Address Government Affairs Director  
5915 Eastman Ave., Ste. 100City State Zip Code  
Midland MI 48640FEC ID number of contributing  
federal political committee. **C** C00350462

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36069

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B. Credit Suisse Securities (USA) PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1155 21st Street, NW, Ste. 300

City State Zip Code  
Washington DC 20036FEC ID number of contributing  
federal political committee. **C** C00111559Name of Employer  
CS First Boston Action Fu-  
nd

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36027

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

Mailing Address Mr. William Behan  
1808 I Street, NW, 8th FloorCity State Zip Code  
Washington DC 20006FEC ID number of contributing  
federal political committee. **C** C00204099Name of Employer  
John Deere & Co PAC

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  
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35892

Amount of Each Receipt this Period

2000.00

Receipt

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

7000.00

**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 35 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Delta Dental PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 1515 W. 22nd St Suite 1200		<b>Transaction ID:</b> 60927.C35515
City Oak Brook	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. <b>C</b> C00213819		Amount of Each Receipt this Period 1000.00
Name of Employer Delta PAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Diageo North Amer Inc. Pac		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1301 K Street		<b>Transaction ID:</b> 61006.C35990
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00034470		Amount of Each Receipt this Period 1000.00
Name of Employer Diageo North America Inc. Pac	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Directors Guild of Amer PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address Mr. John Porter 1150 17th Street, NW, Ste 601		<b>Transaction ID:</b> 60830.C35101
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. <b>C</b> C00311944		Amount of Each Receipt this Period 1000.00
Name of Employer Directors Guild of Am Inc PAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

**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 36 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Dirigo PAC

Mailing Address PO Box 1355

City	State	Zip Code
Alexandria	VA	22313

FEC ID number of contributing  
federal political committee.**C** C00391797

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
0 9	/	3 0	/	2 0 0 6

Transaction ID: 61006.C35937

Amount of Each Receipt this Period

1000.00

Receipt

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

DRS Technologies Good Government Fund

Mailing Address Mr. Steve Ansley  
1755 S Jefferson Davis Hwy, Ste 11

City	State	Zip Code
Arlington	VA	22202

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 ▼

5000.00

Date of Receipt

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

Transaction ID: 60927.C35517

Amount of Each Receipt this Period

1000.00

Receipt

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

Dykema Gossett Federal PAC

Mailing Address 201 Townsend St., Ste. 900

City	State	Zip Code
Lansing	MI	48933

FEC ID number of contributing  
federal political committee.**C** C00342113

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 7	/	2 0 0 6

Transaction ID: 61006.C35562

Amount of Each Receipt this Period

500.00

Receipt

☐ 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 37 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Edwards Lifesciences PAC

Mailing Address One Edwards Way

City State Zip Code  
 Big Bear City CA 92314

FEC ID number of contributing  
federal political committee.

**C** C00411900

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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35888

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Eli Lilly & Company PAC

Mailing Address Mr. Jay Bonitt  
 555 - 12th Street, NW, Ste 650

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00082792

Name of Employer  
 Eli Lilly & Co PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 60927.C35391

Amount of Each Receipt this Period

5000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Emerson Electric Co. Responsible Govt

Mailing Address Mr. Robert McDonald  
 700 13th Street, NW, Suite 700

City State Zip Code  
 Washington DC 20005-3960

FEC ID number of contributing  
federal political committee.

**C** C00080515

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35608

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Energy East PAC Mailing Address 89 East Ave. City State Zip Code Rochester NY 14649 FEC ID number of contributing federal political committee. <b>C</b> C00406801 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 Y              0 9 / 3 0 / 2 0 0 6           </div> <b>Transaction ID:</b> 61009.C36131 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ernst & Young PAC Mailing Address Ms. K.C. Tominovich 1225 Connecticut Ave, NW, Ste 600 City State Zip Code Washington DC 20036 FEC ID number of contributing federal political committee. <b>C</b> C00227744 Name of Employer Occupation Ernst & Young PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">7000.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 9 / 2 0 / 2 0 0 6           </div> <b>Transaction ID:</b> 60927.C35525 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2500.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Exelonpac Mailing Address P.O. Box 805379 City State Zip Code Chicago IL 60680 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Exelonpac Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 Y              0 9 / 2 7 / 2 0 0 6           </div> <b>Transaction ID:</b> 61006.C35740 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> 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 39 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Express Scripts Inc. Political Fund

Mailing Address 13900 Riverport Dr.

City State Zip Code  
 Maryland Heights MD 63043

FEC ID number of contributing  
federal political committee.

**C** C00365072

Name of Employer  
Express Scripts Inc. Political

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

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

Transaction ID: 60927.C35384

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Express Scripts Inc. Political Fund

Mailing Address 13900 Riverport Dr.

City State Zip Code  
 Maryland Heights MD 63043

FEC ID number of contributing  
federal political committee.

**C** C00365072

Name of Employer  
Express Scripts Inc. Political

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35611

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Federal Express/FED EXPAC

Mailing Address Mr. Rick Rodgers  
 101 Constitution Ave, NW, Ste 801

City State Zip Code  
 Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00068692

Name of Employer  
Federal Express PAC

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  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35108

Amount of Each Receipt this Period

2500.00

Receipt

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 40 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Financial Serv Roundtable PAC Mailing Address The Honorable Steven Bartlett 1001 Pennsylvania Ave., Ste. 500 S City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00193177 Name of Employer Financial Serv Roundtable PAC Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3000.00	Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35598 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Fiserv Health Inc. PAC Mailing Address Ms. Sarah Ratner 5500 Wayzata Blvd., Ste. 500 City Minneapolis State MN Zip Code 55416 FEC ID number of contributing federal political committee. <b>C</b> C00399949 Name of Employer Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35207 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Florida Power & Light Co. Employees PAC Mailing Address Mr. Michael Wilson 801 Pennsylvania Ave, NW, Ste 220 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00064774 Name of Employer Occupation Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00	Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35946 Amount of Each Receipt this Period 3000.00 Receipt <input type="checkbox"/> 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 41 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
FMR Corp. PAC - Federal

Mailing Address 82 Devonshire St.

City State Zip Code  
 Boston MA 02109

FEC ID number of contributing  
federal political committee. **C** C00380550

Name of Employer  
FMR Corp. PAC

Occupation

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

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35743

Amount of Each Receipt this Period

3000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Friends of John Boehner

Mailing Address 7908 Cincinnati Dayton Rd., Ste. I

City State Zip Code  
 West Chester OH 45069

FEC ID number of contributing  
federal political committee. **C** C00237198

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36031

Amount of Each Receipt this Period

2000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Friends of Ray LaHood

Mailing Address 4238 N. Knoxville Ave.

City State Zip Code  
 Peoria IL 61614

FEC ID number of contributing  
federal political committee. **C** C00284901

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36016

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Friends Of Sam Johnson

Mailing Address PO Box 860096

City State Zip Code  
Plano TX 75086-0096
FEC ID number of contributing  
federal political committee. **C** C00250720

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35942

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.** Full Name (Last, First, Middle Initial)  
Future Leaders PACMailing Address The Honorable Jerry Lewis  
1155 21st St., NW, Ste. 300
City State Zip Code  
Washington DC 20036-3312
FEC ID number of contributing  
federal political committee. **C** C00269407

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36135

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.** Full Name (Last, First, Middle Initial)  
General Electric PACMailing Address Ms. Lynn Harding Thomson  
1299 Pennsylvania Ave, NW, Ste. 11
City State Zip Code  
Washington DC 20004-2407
FEC ID number of contributing  
federal political committee. **C** C00024869

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
9000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36128

Amount of Each Receipt this Period

3500.00

Receipt

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

10500.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

General Motors Corporation PAC

Mailing Address P.O. Box 9077

City	State	Zip Code
Detroit	MI	48202

FEC ID number of contributing  
federal political committee.**C** C00076810Name of Employer  
Civic Involvement Program  
PAC

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
0 9		2 9		2 0 0 6

Transaction ID: 61006.C35883

Amount of Each Receipt this Period

1000.00

Receipt

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

Genworth Financial Inc. Inc.

Mailing Address Sam Morgante  
700 12th St., NW, Suite 710

City	State	Zip Code
Washington	DC	20004

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

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
0 9		3 0		2 0 0 6

Transaction ID: 61009.C36118

Amount of Each Receipt this Period

1000.00

Receipt

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

Growth &amp; Prosperity PAC

Mailing Address 2610 Ridge Road Drive

City	State	Zip Code
Alexandria	VA	22302

FEC ID number of contributing  
federal political committee.**C** C00388793

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
0 9		3 0		2 0 0 6

Transaction ID: 61006.C35950

Amount of Each Receipt this Period

5000.00

Receipt

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

7000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Hallmark PAC (Evans Capitol Group)		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address Ms. Kristin Gordon 888 17th Street, NW, Ste 1050		<b>Transaction ID:</b> 61006.C35729	
City Washington State DC Zip Code 20006		Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00000059		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Hallmark Political Action Comm Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Health Insurance Plan of Greater NY Fed		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address Government Affairs Director 55 Water Street		<b>Transaction ID:</b> 60830.C35050	
City New York State NY Zip Code 10041		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00412247		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Health Net Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address Mr. Patrick Johnston 1321 7th St., Ste. 205		<b>Transaction ID:</b> 61006.C35793	
City Santa Monica State CA Zip Code 90401		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00230789		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Health Net Inc. PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Healthcare Distribution Management Assn

Mailing Address 901 North Glebe Rd., Suite 1000

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00247569

Name of Employer  
HDMA PAC

Occupation

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

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35595

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Help Americas Leaders PAC

Mailing Address Honorable Hal Rogers  
1155- 21st Street NW Suite 300

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00376038

Name of Employer  
HALPAC

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  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34940

Amount of Each Receipt this Period

5000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Henry E. Brown Jr. For Congress

Mailing Address PO Box 61886

City State Zip Code  
North Charleston SC 29419

FEC ID number of contributing federal political committee. **C** C00341529

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35785

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

**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 46 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Holiday Inns Inc. Inn/PAC Mailing Address Mr. James McCauley 3 Ravinia Drive, Ste 2000 City Atlanta State GA Zip Code 30346 FEC ID number of contributing federal political committee. <b>C</b> C00084822 Name of Employer Inn Pac Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00	Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34907 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Holiday Inns Inc. Inn/PAC Mailing Address Mr. James McCauley 3 Ravinia Drive, Ste 2000 City Atlanta State GA Zip Code 30346 FEC ID number of contributing federal political committee. <b>C</b> C00084822 Name of Employer Inn Pac Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36021 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Human Rights Campaign PAC Mailing Address Mr. Michael Mings 1640 Rhode Island Ave, N.W. City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00235853 Name of Employer Human Rights Campaign PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5025.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 5 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36162 Amount of Each Receipt this Period 25.00 <b>In-Kind</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) endorsement on website

**SUBTOTAL** of Receipts This Page (optional) .....**2025.00****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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.** Full Name (Last, First, Middle Initial) Independent Insurance Agents

Mailing Address Mr. Nathan Riedel  
412 First St., SE, Ste 300

City State Zip Code  
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer  
Independent Insurance Agents P

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35381

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.** Full Name (Last, First, Middle Initial) ING America Insurance Holdings Inc. PAC

Mailing Address Ms. Deborah Winston  
1501 M Street, NW, Ste 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00184028

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
6500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35933

Amount of Each Receipt this Period

1000.00

Receipt

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

## **C.** Full Name (Last, First, Middle Initial) Intl Assn. of Bridge Structural Ornament

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36035

Amount of Each Receipt this Period

2500.00

Receipt

☐ 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 48 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Intl Council of Shopping Centers Mailing Address Mr. Wayne Mehlman 1033 North Fairfax Street, Ste 404 City State Zip Code Alexandria VA 22314-1540 FEC ID number of contributing federal political committee. <b>C</b> C00217638 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35307 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Internatl Franchising Assn. Mailing Address 1350 New York Ave, N.W. #900 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00084491 Name of Employer Occupation Franchising PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35516 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Internatl Paper PAC Mailing Address 1101 Pennsylvania Ave., NW Suite 200 City State Zip Code Washington DC 20004 FEC ID number of contributing federal political committee. <b>C</b> C00034405 Name of Employer Occupation International Paper PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35103 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Internatl Paper PAC Mailing Address 1101 Pennsylvania Ave., NW Suite 200 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00034405 Name of Employer International Paper PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36039 Amount of Each Receipt this Period 4000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Investment Company Institute Mailing Address Ms. Vivian Lausevic 1401 H Street, NW, Ste 1200 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00105981 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35308 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) IPAA Wildcatter Pac Mailing Address 1201 15th Street NW, STE 300 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00246306 Name of Employer IPAA Wildcatter Pac Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35622 Amount of Each Receipt this Period 2500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**7500.00**

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

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

FOR LINE NUMBER: PAGE 50 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

IRL PAC

Mailing Address PO Box 10460

City	State	Zip Code
Burke	VA	22009

FEC ID number of contributing  
federal political committee.**C** C00402982

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
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35783

Amount of Each Receipt this Period

1000.00

Receipt

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

Issa for Congress

Mailing Address PO Box 760

City	State	Zip Code
Vista	CA	92085-0760

FEC ID number of contributing  
federal political committee.**C** C00350520

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
0 9		3 0		2 0 0 6

Transaction ID: 61009.C36062

Amount of Each Receipt this Period

1000.00

Receipt

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

J.P. Morgan Chase &amp; Co, PAC

Mailing Address Ms. Bridgett Lawless  
800 Connecticut Ave., NW

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing  
federal political committee.**C** C00128512

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7666.66

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 8		1 6		2 0 0 6

Transaction ID: 60830.C35075

Amount of Each Receipt this Period

5000.00

Receipt

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

7000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** JC PENNEY PAC

Mailing Address 6502 Legacy Drive

City State Zip Code  
 Plano TX 75024

FEC ID number of contributing  
federal political committee.

**C** C00042895

Name of Employer  
JC PENNEY PAC

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36030

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Jobs, Economy & Budget Fund

Mailing Address PO Box 40385

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C** C00420695

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36018

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** John S. Fund

Mailing Address 1208 Leland Ave.

City State Zip Code  
 Springfield IL 62704

FEC ID number of contributing  
federal political committee.

**C** C00390831

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35782

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 52 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Judge John Carter For Congress

Mailing Address PO Box 6930

City	State	Zip Code
Round Rock	TX	78683

FEC ID number of contributing  
federal political committee. **C** C00371203

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1048.50

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 1 / 2 0 0 6

Transaction ID: 60725.C34914

Amount of Each Receipt this Period

48.50

In-Kind

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

fundraiser letter

**B.** Full Name (Last, First, Middle Initial)  
Judy Biggert for Congress

Mailing Address P.O. Box 637

City	State	Zip Code
Hinsdale	IL	60522

FEC ID number of contributing  
federal political committee. **C** C00330241Name of Employer Occupation  
Judy Biggert for CongressReceipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
853.57

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 3 / 2 0 0 6

Transaction ID: 60927.C35532

Amount of Each Receipt this Period

853.57

In-Kind

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

catering for 8/24/06 event

**C.** Full Name (Last, First, Middle Initial)  
Judy Biggert for Congress

Mailing Address P.O. Box 637

City	State	Zip Code
Hinsdale	IL	60522

FEC ID number of contributing  
federal political committee. **C** C00330241Name of Employer Occupation  
Judy Biggert for CongressReceipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2099.70

Date of Receipt

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

Transaction ID: 60927.C35383

Amount of Each Receipt this Period

1246.13

Receipt

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

2148.20

**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 53 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.**

Full Name (Last, First, Middle Initial)

Kay Granger for Congress

Mailing Address 910 Houston Street. Ste. 105

City State Zip Code  
 Fort Worth TX 76102

FEC ID number of contributing  
federal political committee.

**C** C00310532

Name of Employer  
Kay Granger for Congress

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36063

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.**

Full Name (Last, First, Middle Initial)

Keep Our Majority PAC

Mailing Address P.O. Box 20209

City State Zip Code  
 Alexandria VA 22320

FEC ID number of contributing  
federal political committee.

**C** C00307405

Name of Employer  
Keep Our Majority PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 60927.C35528

Amount of Each Receipt this Period

5000.00

Receipt

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

## **C.**

Full Name (Last, First, Middle Initial)

Ken Calvert for Congress Committee

Mailing Address PO Box 20123

City State Zip Code  
 Riverside CA 92516

FEC ID number of contributing  
federal political committee.

**C** C00257337

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36008

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
KPMG Partners/Principals & Employees PAC

Mailing Address Mr. Scott McLucas  
2001 M Street, NW

City State Zip Code  
Washington DC 20036-3389

FEC ID number of contributing  
federal political committee.

**C** C00280222

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35945

Amount of Each Receipt this Period

2500.00

Receipt

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

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

Leadership for Americas Future PAC

Mailing Address 3101 N. Central Ave., Ste. 1500

City State Zip Code  
Phoenix AZ 85012

FEC ID number of contributing  
federal political committee.

**C** C00342378

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35777

Amount of Each Receipt this Period

2000.00

Receipt

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

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

Leading Us in Success PAC

Mailing Address PO Box 40327

City State Zip Code  
Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C** C00408054

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35774

Amount of Each Receipt this Period

2000.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Lewis for Congress

Mailing Address PO Box 247

City State Zip Code  
 Redlands CA 92373

FEC ID number of contributing  
federal political committee.

**C** C00090357

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36134

Amount of Each Receipt this Period

2000.00

Receipt

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

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

Liberty Mutual Ins PAC

Mailing Address 175 Berkeley Street

City State Zip Code  
 Boston MA 02117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Liberty Mutual Ins PAC

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  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35112

Amount of Each Receipt this Period

5000.00

Receipt

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

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

Lincoln National Corporation PAC

Mailing Address Mr. James A. Morrill  
 1455 Pennsylvania Ave, NW, Ste 126

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00110577

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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35891

Amount of Each Receipt this Period

1000.00

Receipt

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

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

8000.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Longhorn PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35949
Mailing Address Government Relations Director 228 S. Washington St., Ste. B-20		Amount of Each Receipt this Period 5000.00
City Alexandria State VA Zip Code 22314	FEC ID number of contributing federal political committee. <b>C</b> C00402602	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 9000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Louisiana Health Care Group Emp. Fed. PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35923
Mailing Address Government Affairs Director 420 West Pinhook, Suite A		Amount of Each Receipt this Period 500.00
City Lafayette State LA Zip Code 70503	FEC ID number of contributing federal political committee. <b>C</b> C00382796	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1500.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Majority in Congress PAC		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36133
Mailing Address The Honorable John L. Mica 601 N. Ferncreek Ave. Ste. 200		Amount of Each Receipt this Period 1000.00
City Orlando State FL Zip Code 32803	FEC ID number of contributing federal political committee. <b>C</b> C00402909	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00	

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

6500.00

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



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

FOR LINE NUMBER: PAGE 57 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marsha Blackburn for Congress Mailing Address PO Box 682185 City State Zip Code Franklin TN 37068 FEC ID number of contributing federal political committee. <b>C</b> C00376939 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1500.00</div>		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>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 61006.C36022 Amount of Each Receipt this Period <div style="text-align: right;">1500.00</div> Receipt <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	0	9		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		3	0		2	0	0	6													
<b>B.</b> Full Name (Last, First, Middle Initial) Mass Mutual Life Insurance PAC Mailing Address Ms. Allison B. Weiss 601 Pennsylvania Ave, NW, Ste 4205 City State Zip Code Washington DC 20004-3622 FEC ID number of contributing federal political committee. <b>C</b> C00118943 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">5000.00</div>		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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 61006.C35624 Amount of Each Receipt this Period <div style="text-align: right;">3000.00</div> Receipt <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	0	9		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													
<b>C.</b> Full Name (Last, First, Middle Initial) MeadWestVaco Corporation PAC Mailing Address Mr. Alex Stoddard 1401 I Street, NW, Ste 345 City State Zip Code Washington DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00065987 Name of Employer Occupation Meadwestvaco PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2000.00</div>		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>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 61006.C35616 Amount of Each Receipt this Period <div style="text-align: right;">2000.00</div> Receipt <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	0	9		2	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	7		2	0	0	6													

**SUBTOTAL** of Receipts This Page (optional) .....**6500.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 58 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Medco Health Solutions Inc.

Mailing Address Mr. Peter Begans

601 Pennsylvania Ave. NW, Ste. 700

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing  
federal political committee.

**C** C00384362

Name of Employer  
Medco Health PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 60927.C35388

Amount of Each Receipt this Period

4000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Medtronic Inc Medical Technology Fund

Mailing Address Mr. Pete Slone

1300 Pennsylvania Ave, NW, Ste 380

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing  
federal political committee.

**C** C00311878

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

9500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35623

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Merck and Company PAC

Mailing Address Ms. Laurie Michael

601 Pennsylvania Ave, NW Ste 1200

City

State

Zip Code

Washington

DC

20004-2601

FEC ID number of contributing  
federal political committee.

**C** C00097485

Name of Employer  
Merck PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36037

Amount of Each Receipt this Period

3000.00

Receipt

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

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

9500.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) MetLife, Inc. PAC Mailing Address Ms. Janet Howard 1620 L Street, NW, Ste 800 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00040923 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 9000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35073 Amount of Each Receipt this Period 4000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) MetLife, Inc. PAC Mailing Address Ms. Janet Howard 1620 L Street, NW, Ste 800 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00040923 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35882 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Microsoft Corporation PAC Mailing Address Mr. John F. Sampson, Jr. 1401 I Street, NW, Ste 500 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00227546 Name of Employer Microsoft Corp PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36011 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Milead Fund Pac

Mailing Address P.O. Box 65796

City State Zip Code  
 Washington DC 20035

FEC ID number of contributing  
federal political committee. **C** C00377663

Name of Employer  
Milead Fund Pac

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36114

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Miller & Chevalier Chartered PAC

Mailing Address 655 15th St., NW, #900

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00255216

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35589

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Morgan Stanley PAC

Mailing Address Mr. Samuel Baptista  
 401 Ninth Street, NW, Ste 650

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee. **C** C00337626

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35741

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** MWH Americas Inc. Employees PAC

Mailing Address 380 Interlocken Crescent, Ste. 200

City State Zip Code  
 Broomfield CO 80021

FEC ID number of contributing  
federal political committee. **C** C00242370

Name of Employer

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36066

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Nrl Funeral Directors Assn. of the US

Mailing Address Mr. John H. Fitch, Jr.  
 400 C Street, NE

City State Zip Code  
 Washington DC 20002

FEC ID number of contributing  
federal political committee. **C** C00204008

Name of Employer  
 Ntl Funeral Dir Assoc PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: 60927.C35382

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Natl Active & Retired Federal Empl. Ass

Mailing Address Government Affairs Director  
 606 North Washington Street

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee. **C** C00091561

Name of Employer  
 NARFE (National Associati-  
 on of

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

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

Transaction ID: 60927.C35526

Amount of Each Receipt this Period

3000.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 62 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Natl Assc of Real Estate Invest Trust		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address Mr. Martin L. DePoy 1875 I Street, NW, Ste 500		<b>Transaction ID:</b> 61006.C35615	
City State Zip Code Washington DC 20006-5413		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00303339		Receipt <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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 6500.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Natl Assn of Realtors PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address Mr. Jim Freeman 700 11th Street, NW		<b>Transaction ID:</b> 60830.C35172	
City State Zip Code Washington DC 20001-4507		Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00030718		Receipt <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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Natl Auto Dealers Assn PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6	
Mailing Address Mr. Josh Amos 8400 Westpark Drive		<b>Transaction ID:</b> 60830.C35274	
City State Zip Code Mc Lean VA 22102		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00040998		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Nat Auto Dealers Assn PAC		Election Cycle-to-Date ▼ 2500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 63 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Natl Beer Wholesalers Assn PAC

Mailing Address Mr. David Rehr  
1101 King Street, Ste 600

City State Zip Code  
Alexandria VA 22314-2944

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer  
National Beer Wholesalers  
PAC

Occupation

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

Election Cycle-to-Date ▼  
7500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35994

Amount of Each Receipt this Period

2500.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Natl Confectioneers Assn iof the US PAC

Mailing Address 8320 Old Courthouse Road, Ste. 300

City State Zip Code  
Vienna VA 22182-3811

FEC ID number of contributing federal political committee. **C** C00003855

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35988

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Natl Electrical Manufacturers Assn. PAC

Mailing Address 1300 17th St., N, Ste. 1847

City State Zip Code  
Arlington VA 22209-3801

FEC ID number of contributing federal political committee. **C** C00331173

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36126

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 64 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Natl Fed. of Business Womens Clubs In

Mailing Address 2012 Massachusetts Avenue, NW

City State Zip Code  
Washington DC 20036
FEC ID number of contributing  
federal political committee.**C** C00119545

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 0 / 2 0 0 6

Transaction ID: 60927.C35376

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.** Full Name (Last, First, Middle Initial)  
Natl Lumber & Building Material Dealers

Mailing Address 900 2nd St., NE, Ste. 305

City State Zip Code  
Washington DC 20002
FEC ID number of contributing  
federal political committee.**C** C00039214

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35514

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.** Full Name (Last, First, Middle Initial)  
Natl Retail Federation , Inc.Mailing Address Mr. Steve Pfister  
325 7th Street, NW Ste 1100
City State Zip Code  
Washington DC 20004
FEC ID number of contributing  
federal political committee.**C** C00040329Name of Employer  
Retail PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35590

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Natl Stone Sand & Gravel Assn		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address Mr. James Riley 1605 King Street		<b>Transaction ID:</b> 61009.C36117
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <b>C</b> C00089458		Amount of Each Receipt this Period 1000.00
Name of Employer ROCKPAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Nat. Assn of Psychiatric Health Systems		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address Government Affiars Director 701 13th Street, NW, Suite 950		<b>Transaction ID:</b> 61006.C35612
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C</b> C00107136		Amount of Each Receipt this Period 2000.00
Name of Employer NAPHS PAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) National Emergency Medicine PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address Ms. Laura Gans 2121 K Street, NW, Suite 325		<b>Transaction ID:</b> 61006.C35992
City Washington	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. <b>C</b> C00140061		Amount of Each Receipt this Period 2000.00
Name of Employer Amer Coll of Em Physicians PAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

New American Leadership Fund

Mailing Address PO Box 40366

City State Zip Code  
 Washington DC 20016-0366

FEC ID number of contributing  
federal political committee. **C** C00384891

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36019

Amount of Each Receipt this Period

1000.00

Receipt

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

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

New Pac

Mailing Address PO Box 7480

City State Zip Code  
 CA 93290

FEC ID number of contributing  
federal political committee. **C** C00398750

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36029

Amount of Each Receipt this Period

2000.00

Receipt

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

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

New York Mercantile Exchange PAC

Mailing Address One North End Ave., 14th Fl.

City State Zip Code  
 New York NY 10282

FEC ID number of contributing  
federal political committee. **C** C00230185

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35932

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Next Century Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35389 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Mailing Address The Honorable Richard Burr 116 S. Royal St. City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00343947 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Nixon Peabody LLP Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35218 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Mailing Address Mr. Stephen Wallace 401 9th Street, NW, Sute 900 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00404178 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Nixon Peabody LLP Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36119 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Mailing Address Mr. Stephen Wallace 401 9th Street, NW, Sute 900 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00404178 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		

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

11000.00

**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 68 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Northeast Utilities Employees PAC Mailing Address Mr. Todd Lavin 601 Pennsylvania Ave, NW, Ste 620 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00102160 Name of Employer Northeast Utilities Employees Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36013 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Northwestern Mutual Life Comp. PAC Mailing Address Mr. Michael Youngman 720 East Wisconsin Avenue City Milwaukee State WI Zip Code 53202 FEC ID number of contributing federal political committee. <b>C</b> C00197095 Name of Employer Northwest Mutual Life PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35941 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Nuclear Energy Institute PAC Mailing Address Ms. Kiran Harter 1776 I Street, NW, Ste 400 City Washington State DC Zip Code 20006-3708 FEC ID number of contributing federal political committee. <b>C</b> C00239848 Name of Employer Nuclear Energy Inst PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36005 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <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 69 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Oldcastle Materials Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35577	
Mailing Address Mr. John Hay 1055 Thomas Jefferson Street, NW		<b>Amount of Each Receipt this Period</b> 1000.00	
City Washington State DC Zip Code 20007		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00346353			
Name of Employer OLDCASTLE Materials Inc. PAC Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) PAC for Employees of Dow Chemical Co		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36116	
Mailing Address 2030 Dow Center		<b>Amount of Each Receipt this Period</b> 1000.00	
City Midland State MI Zip Code 48674		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00074096			
Name of Employer Dow Chemical Co PAC Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Pacific Life Insurance Company PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35390	
Mailing Address Mr. Robert Haskell 700 Newport Center Drive		<b>Amount of Each Receipt this Period</b> 5000.00	
City Newport Beach State CA Zip Code 92660		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. <b>C</b> C00068528			
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 9000.00	

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

7000.00

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

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

FOR LINE NUMBER: PAGE 70 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Patton Boggs PAC

Mailing Address 2550 M Street, NW

City State Zip Code  
Washington DC 20037

FEC ID number of contributing  
federal political committee. **C** C00401083

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
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35588

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
People for Enterprise, Trade & Economic

Mailing Address The Honorable Pete Sessions  
7804 Evening Lane

City State Zip Code  
Alexandria VA 22306

FEC ID number of contributing  
federal political committee. **C** C00363770

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
0 8		0 3		2 0 0 6

Transaction ID: 60830.C35174

Amount of Each Receipt this Period

5000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
People With Hart

Mailing Address PO Box 435

City State Zip Code  
Wexford PA 15090

FEC ID number of contributing  
federal political committee. **C** C00346114Name of Employer Occupation  
People with Hart

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 7		2 0 0 6

Transaction ID: 61006.C35791

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

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 71 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Pharmerica PAC Mailing Address 175 Kelsey Lane City Tampa State FL Zip Code 33619 FEC ID number of contributing federal political committee. <b>C</b> C00397455 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35491 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund PAC Mailing Address Mr. Chris Korsmo 1780 Massachusetts Avenue, NW City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00314617 Name of Employer Planned Parenthood PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35276 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) PowerPAC, Edison Electric Institute Mailing Address Ms. Monica Epps 701 Pennsylvania Ave., NW City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00095869 Name of Employer Power Pac Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C36042 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**11000.00****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 72 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.** Full Name (Last, First, Middle Initial) PPG Better Government Team

Mailing Address Mr. Jeffrey Gilbert  
One PPG Place

City State Zip Code  
Pittsburgh PA 15272

FEC ID number of contributing  
federal political committee. **C** C00034298

Name of Employer  
PPG Better Gov. Team

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35737

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.** Full Name (Last, First, Middle Initial) Precision Metalforming Assn

Mailing Address 6363 Oak Tree Blvd

City State Zip Code  
Independence OH 44131-2500

FEC ID number of contributing  
federal political committee. **C** C00082271

Name of Employer  
Precision Metalforming As-  
socio

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35796

Amount of Each Receipt this Period

1000.00

Receipt

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

## **C.** Full Name (Last, First, Middle Initial) Precision Metalforming Assn

Mailing Address 6363 Oak Tree Blvd

City State Zip Code  
Independence OH 44131-2500

FEC ID number of contributing  
federal political committee. **C** C00082271

Name of Employer  
Precision Metalforming As-  
socio

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35597

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 73 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.** Full Name (Last, First, Middle Initial) Premier Inc. Employees Civic Action Fund

Mailing Address Mr. Herb B. Kuhn  
444 Noth Capitol Street, NW, Suite

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00346288

Name of Employer  
Premier Employees PAC

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35582

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.** Full Name (Last, First, Middle Initial) Preston Gates Ellis Meeds

Mailing Address 1735 New York Ave. NW  
Suite 500

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer  
Preston Gates Ellis Meeds

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35601

Amount of Each Receipt this Period

1000.00

Receipt

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

## **C.** Full Name (Last, First, Middle Initial) Price for Congress

Mailing Address PO Box 425

City State Zip Code  
Roswell GA 30077

FEC ID number of contributing federal political committee. **C** C00386755

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35788

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 74 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) PriceWaterhouseCoopers PAC I Mailing Address Ms. Laura Cox 1301 K St., NW, Suite 700W City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00107235 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35379 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) PriceWaterhouseCoopers PAC I Mailing Address Ms. Laura Cox 1301 K St., NW, Suite 700W City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00107235 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35742 Amount of Each Receipt this Period 2500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Printing Industries of America PAC Mailing Address 100 Daingerfield Road City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00018028 Name of Employer Printing Industries PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35613 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**5500.00**

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

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

FOR LINE NUMBER: PAGE 75 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Procter & Gamble PAC Mailing Address Mr. Jim McCarthy 801 Pennsylvania Ave, NW, Ste 720 City Washington State DC Zip Code 20004-2604 FEC ID number of contributing federal political committee. <b>C</b> C00257329 Name of Employer Procter & Gamble PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35173 Amount of Each Receipt this Period 3000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Professional Insurance Agents PAC Mailing Address Kellie Bray 400 N. Washington St City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00004994 Name of Employer PIAPAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35277 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Professionals PAC (HDR) Mailing Address 8404 Indian Hills Drive City Omaha State NE Zip Code 68114 FEC ID number of contributing federal political committee. <b>C</b> C00103903 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35607 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> 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 76 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Professionals PAC (HDR)  
 Mailing Address 8404 Indian Hills Drive

City State Zip Code  
 Omaha NE 68114

FEC ID number of contributing  
federal political committee. **C** C00103903

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35934

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Prosperity PAC  
 Mailing Address The Honorable Paul Ryan  
 429 N. Saint Asaph

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee. **C** C00377689

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  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35527

Amount of Each Receipt this Period

5000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Prostate Cancer Research PAC  
 Mailing Address 212 N. Sangamon St., #1A

City State Zip Code  
 Chicago IL 60607-1711

FEC ID number of contributing  
federal political committee. **C** C00329979

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35931

Amount of Each Receipt this Period

500.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Prudential Financial Inc. PAC Mailing Address Mr. Chris Payne 1140 Connecticut Avenue, NW, Ste 5 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00127779 Name of Employer Prudential Insur Co. PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35424 Amount of Each Receipt this Period 2500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Psychiatric Solutions Inc. Fed Pac Mailing Address 840 Crescent Centre Drive, Ste. 46 City Franklin State TN Zip Code 37067 FEC ID number of contributing federal political committee. <b>C</b> C00407684 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35609 Amount of Each Receipt this Period 1500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Purdue Pharma Inc. PAC Mailing Address One Stamford Forum City Stamford State CT Zip Code 06901 FEC ID number of contributing federal political committee. <b>C</b> C00370643 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35074 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

9000.00

**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 78 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Quest Diagnostics Inc. PAC

Mailing Address Ms. Kristen Cusick  
815 Connecticut Ave, NW, Ste 330

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00329185

Name of Employer  
Quest Diagnostics Emp PAC

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  
09 / 30 / 2006

Transaction ID: 61006.C35926

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Raytheon Company PAC

Mailing Address Ms. Judy Pauletich  
1100 Wilson Blvd, Ste 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

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  
09 / 27 / 2006

Transaction ID: 61006.C35593

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** RED PAC

Mailing Address PO Box 51

City State Zip Code  
Homeland FL 33847

FEC ID number of contributing federal political committee. **C** C00389122

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  
09 / 30 / 2006

Transaction ID: 61006.C36020

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

**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 79 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Rehabcare Group Inc. PAC

Mailing Address 7733 Forsyth Blvd., Ste. 2300

City	State	Zip Code
Saint Louis	MO	63105-1806

FEC ID number of contributing  
federal political committee. **C** C00407130

Name of Employer

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
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35621

Amount of Each Receipt this Period

2500.00

Receipt

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

Mailing Address 209 Pennsylvania Ave., SE

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing  
federal political committee. **C** C00344648Name of Employer  
Rely On Your Beliefs PAC

Occupation

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

 Election Cycle-to-Date ▼  
 10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 9		2 7		2 0 0 6

Transaction ID: 61006.C35781

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)  
Republican Majority for Choice PACMailing Address Ms. Maureen Doherty  
1660 L Street, Ste. 609

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing  
federal political committee. **C** C00346635

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
0 8		1 6		2 0 0 6

Transaction ID: 60830.C35102

Amount of Each Receipt this Period

1000.00

Receipt

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

8500.00

**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 80 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.** Full Name (Last, First, Middle Initial) Republicans for Environmental Protection

Mailing Address Government Affairs Director  
 PO Box 412

City State Zip Code  
 Ridley Park PA 19078

FEC ID number of contributing  
federal political committee. **C** C00373589

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  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35272

Amount of Each Receipt this Period

1000.00

Receipt

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

## **B.** Full Name (Last, First, Middle Initial) Responsibility & Freedom Work PAC

Mailing Address PO Box 1231

City State Zip Code  
 Tupelo MS 38802-1231

FEC ID number of contributing  
federal political committee. **C** C00368696

Name of Employer Occupation  
 RFWPAC PAC

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35779

Amount of Each Receipt this Period

1000.00

Receipt

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

## **C.** Full Name (Last, First, Middle Initial) Safeguarding Amer by Expanding Natl Sec

Mailing Address PO Box 40118

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee. **C** C00409649

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36040

Amount of Each Receipt this Period

5000.00

Receipt

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

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

7000.00

**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 81 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sanofi Pasteur PAC

Mailing Address Mr. Sean Callinicos

801 Pennsylvania Ave., NW, Ste. 72

City

State

Zip Code

Washington

DC

20004-2615

FEC ID number of contributing  
federal political committee.

**C** C00215236

Name of Employer  
Connaught Labs PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35640

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Sanofi-Aventis Employees PAC

Mailing Address Ms. Andrea Wilkensen

801 Pennsylvania Ave, NW, Ste 725

City

State

Zip Code

Washington

DC

20004-2615

FEC ID number of contributing  
federal political committee.

**C** C00144345

Name of Employer  
Aventis Pharm. PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36068

Amount of Each Receipt this Period

3000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Schering-Plough Corporation PAC

Mailing Address Mr. Paul Ehrlich

1130 Connecticut Avenue, NW, Ste 5

City

State

Zip Code

Washington

DC

20036

FEC ID number of contributing  
federal political committee.

**C** C00108290

Name of Employer  
Schering-Plough PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36120

Amount of Each Receipt this Period

5000.00

Receipt

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

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

9000.00

**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 82 / 414

(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

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

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sears PAC Mailing Address Ms. Penny Cate 3333 Beverly Road, BC 103A City Hoffman Estates State IL Zip Code 60179 FEC ID number of contributing federal political committee. <b>C</b> C00038612 Name of Employer Sears Political Action Co- mitt Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 1000.00	Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35599 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Securities Industry Assn PAC Mailing Address 1425 K Street, 7th Floor City Washington State DC Zip Code 20005-3500 FEC ID number of contributing federal political committee. <b>C</b> C00067504 Name of Employer Securities Industry Assoc. PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 5000.00	Date of Receipt MM / DD / YYYY 09 / 20 / 2006 <b>Transaction ID:</b> 60927.C35392 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Serving Americas Citizens PAC Mailing Address 511 Bashford Lane #5 City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00416289 Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Election Cycle-to-Date ▼ 1000.00	Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35939 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**7000.00****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 83 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Siemens Corporation PAC

Mailing Address Mr. Greg Ward

701 Pennsylvania Avenue, NW, Ste 7

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing  
federal political committee.

**C** C00353797

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35927

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** SIRPAC

Mailing Address 3975 Fair Ridge Dr., Ste. 400

City

State

Zip Code

Fairfax

VA

22033

FEC ID number of contributing  
federal political committee.

**C**

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35468

Amount of Each Receipt this Period

5000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Society for Vascular Surgery PAC

Mailing Address Ms. Pamela Phillips

1640 Wisconsin Ave., NW

City

State

Zip Code

Washington

DC

20007

FEC ID number of contributing  
federal political committee.

**C** C00381459

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35938

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

**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 84 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Society of Thoracic Surgeons/STS-PAC

Mailing Address Mr. Michael Hogan  
1025 Connecticut Avenue, NW, Ste 1

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00325936

Name of Employer  
Society of Thoracic Surgeons PA

Occupation

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

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61006.C36038

Amount of Each Receipt this Period

4000.00

Receipt

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

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

Sonosite Inc. PAC

Mailing Address 21919 30th Drive SE

City State Zip Code  
Bothell WA 98021

FEC ID number of contributing federal political committee. **C** C00404251

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  
09 / 27 / 2006

Transaction ID: 61006.C35592

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Sonosite Inc. PAC

Mailing Address 21919 30th Drive SE

City State Zip Code  
Bothell WA 98021

FEC ID number of contributing federal political committee. **C** C00404251

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 30 / 2006

Transaction ID: 61006.C36034

Amount of Each Receipt this Period

2500.00

Receipt

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

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

7500.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Southwest Airlines Company Freedom Fund

Mailing Address Ms. Joanne Bowers  
1901 L Street, NW, Ste 640

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00341602

Name of Employer  
Southwest Airlines

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35584

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Mailing Address 1801 Market Street  
10 Penn Center

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SUN PAC

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35167

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Mailing Address 1801 Market Street  
10 Penn Center

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SUN PAC

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35948

Amount of Each Receipt this Period

4000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sunshine PAC Mailing Address The Honorable Clay Shaw 133 East Indiana Ave. City Deland State FL Zip Code 32724 FEC ID number of contributing federal political committee. <b>C</b> C00335208 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36060 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Teaching Hospital Education PAC Mailing Address Mr. William Signer 805 15th Street, NW, Ste 500 City Washington State DC Zip Code 20005-2207 FEC ID number of contributing federal political committee. <b>C</b> C00360792 Name of Employer Teaching Hospital Education PA Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35148 Amount of Each Receipt this Period 5000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Teaching Hospital Education PAC Mailing Address Mr. William Signer 805 15th Street, NW, Ste 500 City Washington State DC Zip Code 20005-2207 FEC ID number of contributing federal political committee. <b>C</b> C00360792 Name of Employer Teaching Hospital Education PA Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35147 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

10000.00

**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 87 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Team Emerson for Jo Ann Emerson

Mailing Address PO Box 822

City State Zip Code  
Cape Girardeau MO 63702

FEC ID number of contributing  
federal political committee.

**C** C00320457

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y  
09 20 2006

Transaction ID: 60927.C35387

Amount of Each Receipt this Period

2100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Team Republicans Utilizing Sensible Tact

Mailing Address 228 S. Washington St., Ste. 115

City State Zip Code  
Alexandria VA 22314-5404

FEC ID number of contributing  
federal political committee.

**C** C00330720

Name of Employer  
Trust PAC

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  
09 27 2006

Transaction ID: 61006.C35778

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Team Republicans Utilizing Sensible Tact

Mailing Address 228 S. Washington St., Ste. 115

City State Zip Code  
Alexandria VA 22314-5404

FEC ID number of contributing  
federal political committee.

**C** C00330720

Name of Employer  
Trust PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
09 30 2006

Transaction ID: 61006.C36028

Amount of Each Receipt this Period

2000.00

Receipt

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

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

5100.00

**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 88 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Textile Rental Services Assn of America

Mailing Address 1800 Diagonal Rd., Ste. 200

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing  
federal political committee.**C** C00279828

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 7	/	2 0 0 6

Transaction ID: 61006.C35572

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** The Badger FundMailing Address Government Affairs Director  
1055 Thomas Jefferson St., NW, St

City	State	Zip Code
Washington	DC	20007

FEC ID number of contributing  
federal political committee.**C** C00409680

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
0 9	/	3 0	/	2 0 0 6

Transaction ID: 61006.C35995

Amount of Each Receipt this Period

3000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** The Hawkeye PAC

Mailing Address PO Box 7255

City	State	Zip Code
Des Moines	IA	50309

FEC ID number of contributing  
federal political committee.**C** C00379479

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
0 9	/	3 0	/	2 0 0 6

Transaction ID: 61006.C35989

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 89 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
The Timken Company Good Govt FundMailing Address Mr. Robert J. Lapp  
1835 Dueber Ave., SW, Box 6928City State Zip Code  
Canton OH 44706-0928FEC ID number of contributing  
federal political committee. **C** C00311308Name of Employer  
Timken Co. PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35744

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)  
The Wish List PACMailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302City State Zip Code  
Alexandria VA 22314FEC ID number of contributing  
federal political committee. **C** C00258277Name of Employer  
Wish List PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1103.61

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 1 / 2 0 0 6

Transaction ID: 60803.C35010

Amount of Each Receipt this Period

31.70

In-Kind

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

e-mail communication

**C.** Full Name (Last, First, Middle Initial)  
The Wish List PACMailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302City State Zip Code  
Alexandria VA 22314FEC ID number of contributing  
federal political committee. **C** C00258277Name of Employer  
Wish List PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1135.01

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60830.C35280

Amount of Each Receipt this Period

31.40

In-Kind

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

e-mail

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

3063.10

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 90 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) The Wish List PAC Mailing Address Ms. Pat Carpenter 333 North Fairfax St., Ste. 302 City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00258277 Name of Employer Wish List PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1408.01		Date of Receipt MM / DD / YYYY 08 / 08 / 2006 <b>Transaction ID:</b> 60830.C35116 Amount of Each Receipt this Period 273.00 In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) e-mail
<b>B.</b> Full Name (Last, First, Middle Initial) The Wish List PAC Mailing Address Ms. Pat Carpenter 333 North Fairfax St., Ste. 302 City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00258277 Name of Employer Wish List PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1622.51		Date of Receipt MM / DD / YYYY 08 / 08 / 2006 <b>Transaction ID:</b> 60830.C35115 Amount of Each Receipt this Period 214.50 In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) postge
<b>C.</b> Full Name (Last, First, Middle Initial) The Wish List PAC Mailing Address Ms. Pat Carpenter 333 North Fairfax St., Ste. 302 City Alexandria State VA Zip Code 22314 FEC ID number of contributing federal political committee. <b>C</b> C00258277 Name of Employer Wish List PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2176.55		Date of Receipt MM / DD / YYYY 08 / 08 / 2006 <b>Transaction ID:</b> 60830.C35114 Amount of Each Receipt this Period 554.04 In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) printing

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

1041.54

**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 91 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) The Wish List PAC Mailing Address Ms. Pat Carpenter 333 North Fairfax St., Ste. 302 City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. <b>C</b> C00258277 Name of Employer Wish List PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2250.75</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">0 8 / 3 0 / 2 0 0 6</div> <b>Transaction ID:</b> 60927.C35361 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">74.20</div> In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) e-mails
<b>B.</b> Full Name (Last, First, Middle Initial) The Wish List PAC Mailing Address Ms. Pat Carpenter 333 North Fairfax St., Ste. 302 City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. <b>C</b> C00258277 Name of Employer Wish List PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">2318.45</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">0 9 / 0 5 / 2 0 0 6</div> <b>Transaction ID:</b> 60927.C35533 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">67.70</div> In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) e-mails
<b>C.</b> Full Name (Last, First, Middle Initial) Tyco Internatl Inc. Employees PAC Mailing Address Ms. Susan K. Bunning 122 C Street, NW, Ste 520 City State Zip Code Washington DC 20001 FEC ID number of contributing federal political committee. <b>C</b> C00113753 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">3000.00</div>		Date of Receipt <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">0 9 / 2 7 / 2 0 0 6</div> <b>Transaction ID:</b> 61006.C35792 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**1141.90****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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
UBS Americas Fund for Better Government

Mailing Address Mr. Philip Carson  
1501 K Street, NW, Ste 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00012245

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35168

Amount of Each Receipt this Period

2000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Union Pacific Corporation Fund

Mailing Address Ms. Katie Maness  
600 13th Street, NW, Ste 340

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00010470

Name of Employer Occupation  
Union Pacific Fund PAC

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

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35617

Amount of Each Receipt this Period

2000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Unite Here Tip Campaign Committee

Mailing Address Mr. Christopher Chafe  
275 7th Ave.

City State Zip Code  
New York NY 10001

FEC ID number of contributing  
federal political committee. **C** C00004861

Name of Employer 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  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34908

Amount of Each Receipt this Period

2500.00

Receipt

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

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

6500.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. United Rentals, Inc. PAC

Mailing Address Government Affairs Director  
8 Terri Lane, Ste. 1

City State Zip Code  
Burlington NJ 08016

FEC ID number of contributing federal political committee.

C C00409961

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35166

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. UnitedHealth Group Inc PAC

Mailing Address Ms. Elise Gemeinhardt  
1225 New York Avenue, NW, Ste 475

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee.

C C00274431

Name of Employer  
United Health Group Inc  
PAC

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 Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35380

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Universal Health Svc PAC

Mailing Address Mr. Sidney Miller  
367 South Gulph Road

City State Zip Code  
King of Prussia PA 19406

FEC ID number of contributing federal political committee.

C C00185520

Name of Employer  
Universal Health Svc PAC

Occupation

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35610

Amount of Each Receipt this Period

1500.00

Receipt

☐ 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Valero Energy Corp PAC  
Mailing Address PO Box 696000

City State Zip Code  
San Antonio TX 78269

FEC ID number of contributing federal political committee. **C** C00109546

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36006

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Verizon Communications Inc.  
Mailing Address 1717 Arch Street

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation  
Bell Atlantic Corp PAC

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

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36009

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
VHA PAC  
Mailing Address Mr. Duanne Pearson  
220 E, Las Colinal Blvd.

City State Zip Code  
Irving TX 75039-5500

FEC ID number of contributing federal political committee. **C** C00199497

Name of Employer 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  
0 8 / 3 1 / 2 0 0 6

Transaction ID: 60927.C35309

Amount of Each Receipt this Period

1500.00

Receipt

☐ 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 95 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Virginia Foxx for Congress

Mailing Address PO Box 1100

City	State	Zip Code
Clemmons	NC	27012

FEC ID number of contributing  
federal political committee.**C** C00386748

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
0 9		3 0		2 0 0 6

Transaction ID: 61006.C35935

Amount of Each Receipt this Period

1000.00

Receipt

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

Mailing Address 702 SW 8th St.

City	State	Zip Code
Bentonville	AR	72716-0150

FEC ID number of contributing  
federal political committee.**C** C00093054Name of Employer  
Walmart PAC

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
0 9		3 0		2 0 0 6

Transaction ID: 61006.C36043

Amount of Each Receipt this Period

5000.00

Receipt

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

Mailing Address 104 Wilmot Road

City	State	Zip Code
Deerfield	IL	60015

FEC ID number of contributing  
federal political committee.**C** C00160770Name of Employer  
WALGREEN PAC

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
0 9		3 0		2 0 0 6

Transaction ID: 61006.C35936

Amount of Each Receipt this Period

1000.00

Receipt

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

7000.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Wally Herger for Congress Committee

Mailing Address PO Box 1500

City State Zip Code  
 Chico CA 95927

FEC ID number of contributing  
federal political committee.

**C** C00202523

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  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34981

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Wally Herger for Congress Committee

Mailing Address PO Box 1500

City State Zip Code  
 Chico CA 95927

FEC ID number of contributing  
federal political committee.

**C** C00202523

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36065

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Watson Pharmaceuticals Inc. Employees PA

Mailing Address Government Affairs Director  
 311 Bonnie Circle

City State Zip Code  
 Corona CA 92880

FEC ID number of contributing  
federal political committee.

**C** C00391086

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C36004

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Webster Bank Federal PAC

Mailing Address Mr. Arthur H. House  
145 Bank Street, Webster Plaza

City State Zip Code  
Waterbury CT 06720

FEC ID number of contributing federal political committee. **C** C00321406

Name of Employer  
Webster Bank Fed PAC

Occupation

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

Election Cycle-to-Date ▼  
5750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34928

Amount of Each Receipt this Period

5000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Wexler & Walker Public Policy Assoc PAC

Mailing Address 1317 F Street, NW, Ste. 600

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00248195

Name of Employer  
WEXLER GROUP PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35594

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Wholesalers-Distributors PAC

Mailing Address 1725 K Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00109306

Name of Employer  
Wholesalers-Distributors  
PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35603

Amount of Each Receipt this Period

1000.00

Receipt

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

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

7000.00

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Wine & Spirits Wholesalers of America PA

Mailing Address Ms. Rae Ann Bevington  
805 15th Street, NW, Ste 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00147173

Name of Employer  
Wine & Spirits Wholesalers  
PAC

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35602

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Womens Campaign Fund

Mailing Address Ms. Amy Simon  
734 15th Street, NW, Ste 500

City State Zip Code  
Washington DC 20005-1013

FEC ID number of contributing  
federal political committee. **C** C00015024

Name of Employer  
Womens Campaign Fund

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  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35358

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Xerox Corporation PAC

Mailing Address Mr. Mike Farren  
1401 H Street, NW, Ste 200

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00207258

Name of Employer  
Xerox Pac

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35628

Amount of Each Receipt this Period

5000.00

Receipt

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

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

7000.00

**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 99 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

ZENECA INC. PAC

Mailing Address Zeneca Inc. PAC  
1800 Concord PikeCity State Zip Code  
Wilmington DE 19897FEC ID number of contributing  
federal political committee.**C** C00279455Name of Employer  
ZENECA INC. PAC

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36067

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

Zimmer Inc. Better Government Committee

Mailing Address PO Box 708

City State Zip Code  
Warsaw IN 46581-0708FEC ID number of contributing  
federal political committee.**C** C00399386

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35586

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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) .....

530119.74

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

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

FOR LINE NUMBER: PAGE 100 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ameen-Storm Abo-Hamzy

Mailing Address PO Box 381

City

Falls Village

State

CT

Zip Code

06031-0381

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Poet

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35229

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Mary Ackerman

Mailing Address 93 Sharon Road

City

Lakeville

State

CT

Zip Code

06039-2111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

painter/homemaker

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 7 / 2 0 0 6

Transaction ID: 61006.C35725

Amount of Each Receipt this Period

2100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** David Ackert

Mailing Address 36 Broad Street

City

Weston

State

CT

Zip Code

06883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Financial Products

Occupation

Banker

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 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34985

Amount of Each Receipt this Period

2100.00

Receipt

☐ 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 101 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Arja Adair

Mailing Address 5375 S. Geneva Way

City State Zip Code  
 Englewood CO 80111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CFMC

Occupation  
Exec.

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35709

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Daniel Adams

Mailing Address 160 Morgan Ave.

City State Zip Code  
 East Haven CT 06512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Protein Sciences

Occupation  
President

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

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35844

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Jerome Agius

Mailing Address 370 Northrop Street

City State Zip Code  
 Bridgewater CT 06752-1611

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nordex Inc.

Occupation  
CEO

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35036

Amount of Each Receipt this Period

100.00

Receipt

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

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

1300.00

**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 PageFOR LINE NUMBER: PAGE 102 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Beverly Aisenbrey

Mailing Address 143 Old Post Road N.

City State Zip Code  
Hudson NY 10520

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F.W. Cooks Co.Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	0	6

Transaction ID: 60830.C35242

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
S. Mark Albini

Mailing Address 136 North Street

City State Zip Code  
Middlebury CT 06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Physician

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	8		1	6		2	0	0	6

Transaction ID: 60830.C35040

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
S. Mark Albini

Mailing Address 136 North Street

City State Zip Code  
Middlebury CT 06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Physician

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35900

Amount of Each Receipt this Period

200.00

Receipt

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

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

1450.00

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 103 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marcia Alcorn Mailing Address 22 Deep Brook Harbor City Suffield State CT Zip Code 06078 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35711 Amount of Each Receipt this Period 200.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Seyed H. Aleali Mailing Address 4699 Main Street City Bridgeport State CT Zip Code 06606-1830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34904 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jeffrey Alexander Mailing Address 4196 Ivanrest Ave., SW City Grandville State MI Zip Code 49418 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hackley Hospital Occupation Sr. VP, Operations & COO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35555 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

**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 104 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Valerie Andersen

Mailing Address 171 Blackville Rt. 109

City State Zip Code  
 Washington Depot CT 06794

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
requested

Occupation  
Requested

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60927.C35460

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** William Anderson

Mailing Address 616 E St., NW, Apt 1150

City State Zip Code  
 Washington DC 20004-2278

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US Dept. of Defense

Occupation  
Asst. Sec. USAF

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 9 / 2 0 0 6

Transaction ID: 61006.C35881

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Alexandra Armstrong

Mailing Address 3560 Winfield Lane N.W.

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Armstrong MacIntyre & Szu-  
zemi

Occupation  
Financial Advisor

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35251

Amount of Each Receipt this Period

100.00

Receipt

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

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

1300.00

**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 105 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Alexandra Armstrong

Mailing Address 3560 Winfield Lane N.W.

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Armstrong MacIntyre & Szu-  
zensi

Occupation

Financial Advisor

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35904

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Frank Ashburn

Mailing Address 5074 Sedgwick St., NW

City

Washington

State

DC

Zip Code

20016

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36113

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Karla Austen

Mailing Address 157 Old Hyde Rd.

City

Weston

State

CT

Zip Code

06883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Net Connecticut

Occupation

General Manager

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34905

Amount of Each Receipt this Period

500.00

Receipt

☐ 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 106 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Kenneth Baggett

Mailing Address 370 Wembley Circle

City State Zip Code  
 Atlanta GA 30328

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Reznick Group

Occupation  
Accountant

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35097

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Arthur Bahr

Mailing Address 11 Guardhouse Drive

City State Zip Code  
 Redding CT 06896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35091

Amount of Each Receipt this Period

200.00

Receipt

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

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

David Bailey

Mailing Address 534 Post Rd.

City State Zip Code  
 Wakefield RI 02879-7512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60927.C35366

Amount of Each Receipt this Period

50.00

Receipt

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

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

1250.00

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 107 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** David Bailey

Mailing Address 534 Post Rd.

City

Wakefield

State

RI

Zip Code

02879-7512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36054

Amount of Each Receipt this Period

50.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Janet Bailey

Mailing Address 11 Mill Street

City

Nantucket

State

MA

Zip Code

02554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

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 7 / 2 3 / 2 0 0 6

Transaction ID: 60927.C35360

Amount of Each Receipt this Period

1800.00

In-Kind

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

fundraising event expenses

Full Name (Last, First, Middle Initial)

**C.** Ted Bailey

Mailing Address 5245 Miller Rd

City

Brecksville

State

OH

Zip Code

44141-3109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NPR Group

Occupation

Partner

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35210

Amount of Each Receipt this Period

333.00

Receipt

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

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

2183.00

**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 108 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Evelyn Baker Mailing Address 15 Birch Hill Drive City State Zip Code New Britain CT 06052 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 175.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35194 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Evelyn Baker Mailing Address 15 Birch Hill Drive City State Zip Code New Britain CT 06052 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35649 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Vernon G. Baker Mailing Address 1091 Farmington Ave. City State Zip Code Kensington CT 06037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Bach Investments Financial Consultant Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35461 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**375.00**

**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 109 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mark Balfan

Mailing Address 78 Bellfair Road

City State Zip Code  
Port Chester NY 10573

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
requested

Occupation  
Requested

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 7 / 2 0 0 6

Transaction ID: 61006.C35748

Amount of Each Receipt this Period

2100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Stephen Barberino

Mailing Address 1097 Farmington Ave

City State Zip Code  
Bristol CT 06010-4706

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation  
Auto Dealer

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 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36059

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Dirck Barhydt

Mailing Address 115 Sheldon Lane

City State Zip Code  
Litchfield CT 06759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Forman School

Occupation  
education

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35921

Amount of Each Receipt this Period

200.00

Receipt

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

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

2800.00

**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 110 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Carlyle Barnes		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 400 Peacedale Street		<b>Transaction ID:</b> 61006.C35794
City Bristol	State CT	Zip Code 06010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1800.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Carlyle Barnes		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 400 Peacedale Street		<b>Transaction ID:</b> 61006.C35846
City Bristol	State CT	Zip Code 06010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Elizabeth Barnes		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 400 Peacedale Street		<b>Transaction ID:</b> 61006.C35845
City Bristol	State CT	Zip Code 06010
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	

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

1300.00

**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 PageFOR LINE NUMBER: PAGE 111 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Barnes Mailing Address 1900 Perkins Street City Bristol State CT Zip Code 06010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Barnes Group Inc. Occupation Chairman Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35425 Amount of Each Receipt this Period 150.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Saul Basch Mailing Address 25 Mc Intosh Drive City Wilbraham State MA Zip Code 01095 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Steam Boiler Occupation CFO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35100 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Rollin Bates Mailing Address P.O.Box 749 City Lakeville State CT Zip Code 06039-0749 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35822 Amount of Each Receipt this Period 50.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 112 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank Battafarano  
Mailing Address 2700 Little Hills Lane

City State Zip Code  
Anchorage KY 40223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kindred Healthcare

Occupation  
Pres. Hosp. Div.

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

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 61006.C35877

Amount of Each Receipt this Period

750.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Blair Beach  
Mailing Address 555 Lincoln Street

City State Zip Code  
New Britain CT 06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Self employed

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34889

Amount of Each Receipt this Period

200.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Jean Beach  
Mailing Address 555 Lincon Street

City State Zip Code  
New Britain CT 06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35763

Amount of Each Receipt this Period

300.00

Receipt

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

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

1250.00

**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 113 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Brad Beckstrom

Mailing Address 5937 Norwood Place W.

City State Zip Code  
Adamstown MD 21710-9439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Mount Sinai Med. Cent-  
er

Occupation  
Director Govt Affairs

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35141

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Bruce Bennett

Mailing Address 6 Harbour View Drive

City State Zip Code  
New Fairfield CT 06812

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bennett Chevrolet

Occupation  
Auto Dealer

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: 60927.C35477

Amount of Each Receipt this Period

100.00

Receipt

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

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

Raymond Bertino

Mailing Address 427 W.Crestwood Drive

City State Zip Code  
Peoria IL 61614-7255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central Il. Radiology

Occupation  
Radiologist

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

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34878

Amount of Each Receipt this Period

100.00

Receipt

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

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 114 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Raymond Bertino  
Mailing Address 427 W.Crestwood Drive

City State Zip Code  
Peoria IL 61614-7255

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central II. Radiology

Occupation  
Radiologist

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

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35910

Amount of Each Receipt this Period

200.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Jarre Betts  
Mailing Address 1924 Perkins Street

City State Zip Code  
Bristol CT 06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Main Street Community Fou-  
ndati

Occupation  
Director

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

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35771

Amount of Each Receipt this Period

300.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Susan Bevan

Mailing Address Field Point Park

City State Zip Code  
Greenwich CT 06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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 7 / 2 7 / 2 0 0 6

Transaction ID: 60803.C35011

Amount of Each Receipt this Period

500.00

In-Kind

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

event expenses

**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 PageFOR LINE NUMBER: PAGE 115 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kenneth Bialkin Mailing Address 211 Central Park W. City State Zip Code New York NY 10024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Skadden Arps Slate Meagher Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35055 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Victoria Biondi Mailing Address 1760 Perkins Street City State Zip Code Bristol CT 06010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Physicians for Womens Health Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35426 Amount of Each Receipt this Period 300.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Stanley Bitel Mailing Address 137 Rowley Street City State Zip Code Berlin CT 06037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Rowley Spring Co. Inc. Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35035 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Miles Blakeslee

Mailing Address 2255 Ridge Road

City State Zip Code  
 North Haven CT 06473

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35837

Amount of Each Receipt this Period

200.00

Receipt

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

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

Henry Blansfield

Mailing Address 1 Cedarcrest Drive

City State Zip Code  
 Danbury CT 06811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60927.C35480

Amount of Each Receipt this Period

100.00

Receipt

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

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

Andrew Blum

Mailing Address 350 Madison Ave., 11th Floor

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
C.E. Unterberg, Towbin

Occupation  
Chairman

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35093

Amount of Each Receipt this Period

250.00

Receipt

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

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

550.00

**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 117 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Michael Blumenthal  
Mailing Address 89 Avalon Circle

City State Zip Code  
Waterbury CT 06710-1103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UConn

Occupation  
Professor

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35155

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Philp Bonee

Mailing Address 11 Cornell Road

City State Zip Code  
W Hartford CT 06107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
May, Bonee and Walsh

Occupation  
Insurance

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34885

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Linda Bosserman-Piatt

Mailing Address 488 E. Ashbury Lane

City State Zip Code  
Upland CA 91784-8917

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wilshire Oncology Group

Occupation  
Physician

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

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35235

Amount of Each Receipt this Period

2000.00

Receipt

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

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

2600.00

**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 118 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Boston Mailing Address 1 E. Oxford Ave. City State Zip Code Alexandria VA 22301 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Health Policy Source Occupation Consultant Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35164 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Judith Brachman Mailing Address 311 N. Drexel Ave. City State Zip Code Columbus OH 43209 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 09 / 07 / 2006 <b>Transaction ID:</b> 60927.C35348 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Joanne Bradley Mailing Address 316 Gay Street City State Zip Code Sharon CT 06069 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35127 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert S. Bradley  
Mailing Address 1705 Bay Avenue

City State Zip Code  
Point Pleasant Bea NJ 08742

FEC ID number of contributing federal political committee.

C

Name of Employer  
Winston Fin. ServicesOccupation  
CEO

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

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34918

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Robert S. Bradley  
Mailing Address 1705 Bay Avenue

City State Zip Code  
Point Pleasant Bea NJ 08742

FEC ID number of contributing federal political committee.

C

Name of Employer  
Winston Fin. ServicesOccupation  
CEO

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

Election Cycle-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35984

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
David Brady  
Mailing Address 6 Shady Lane

City State Zip Code  
Walpole MA 02081

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hologic Inc.Occupation  
Sup. Human Resources

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35979

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 120 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lavinia Breakell Mailing Address 54 Bare Hill Road City Goshen State CT Zip Code 06756 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1100.00		Date of Receipt MM / DD / YYYY 08 / 16 / 2006 <b>Transaction ID:</b> 60830.C35030 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Marilyn Brewer Mailing Address 1603 Arch Bay Drive City Newport Beach State CA Zip Code 92660 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt MM / DD / YYYY 08 / 31 / 2006 <b>Transaction ID:</b> 60927.C35302 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Donald Brigham Mailing Address P.O. Box 1268 City Washington State CT Zip Code 06793 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 24 / 2006 <b>Transaction ID:</b> 60830.C35281 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1550.00

**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 121 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Donald Brigham

Mailing Address P.O. Box 1268

City State Zip Code  
 Washington CT 06793

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
 350.00

Date of Receipt

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

Transaction ID: 60927.C35455

Amount of Each Receipt this Period

100.00

Receipt

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

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

Michael Bromberg

Mailing Address 2101 Connecticut Ave., NW, #35

City State Zip Code  
 Washington DC 20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol Health Group, LLC

Occupation  
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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35579

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Bob Brooks

Mailing Address 1107 North Pitt St., Unit 2C

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpine Group

Occupation  
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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35873

Amount of Each Receipt this Period

500.00

Receipt

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

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

1600.00

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

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 122 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Clara Brown Mailing Address PO Box 1244 City State Zip Code Abilene TX 79604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1000.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35512 Amount of Each Receipt this Period <div style="text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Geoffrey Brown Mailing Address 5735 Lions Cross Circle City State Zip Code Granite Bay CA 95746 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer USA Properties Occupation Real Estate Developer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1000.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35214 Amount of Each Receipt this Period <div style="text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Frederick Browne Mailing Address PO Box 1645 City State Zip Code New Milford CT 06776 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Milford Hospital Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">300.00</div>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35484 Amount of Each Receipt this Period <div style="text-align: right;">200.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2200.00****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 123 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
William Browne  
Mailing Address 237 Roundhill Road

City State Zip Code  
Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tweedy Browne & Co.

Occupation  
Partner

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

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35339

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Katherine Brush  
Mailing Address P.O. Box 2546

City State Zip Code  
New Preston CT 06777-0546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

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

Election Cycle-to-Date ▼  
900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35692

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Sara Buell  
Mailing Address 634 Tamarack Rd.

City State Zip Code  
Cheshire CT 06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Volunteer

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35338

Amount of Each Receipt this Period

300.00

Receipt

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

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

1400.00

**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 124 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Buhl Mailing Address 114 Greene Street, 5th Floor City New York State NY Zip Code 10012 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer A.C.E. Programs for Homeless Occupation Founder & President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 16 / 2006 <b>Transaction ID:</b> 60830.C35054 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Rosemarie Buntrock Mailing Address One Tower Lane, Suite 2242 City Oakbrook Terrace State IL Zip Code 60181-4636 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 09 / 07 / 2006 <b>Transaction ID:</b> 60927.C35349 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bonnie Burr Mailing Address 27 Dingle Brook Road City Brookfield State CT Zip Code 06804 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Connecticut Farm Bureau Occupation Government Relations Director Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 07 / 19 / 2006 <b>Transaction ID:</b> 60725.C34935 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Ronald Burt  
 Mailing Address 5 Wentworth Park

City State Zip Code  
 Farmington CT 06032-1559

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Woodland Anesthesiologist

Occupation  
 Physician

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

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35336

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Elizabeth Bush  
 Mailing Address 10 Cottage Street

City State Zip Code  
 Hingham MA 02043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Retired

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 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34893

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Peter Byeff  
 Mailing Address 90 Copper Ridge

City State Zip Code  
 Southington CT 06489

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Cancer Center of Central  
 CT

Occupation  
 Physician

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

Election Cycle-to-Date ▼  
 4200.00

Date of Receipt

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

Transaction ID: 60927.C35409

Amount of Each Receipt this Period

200.00

Receipt

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

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

1450.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) C2 Group, LLC Mailing Address 101 Constitution Ave., NW, Ste. 90 City Washington State DC Zip Code 20001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35955 Amount of Each Receipt this Period 1000.00 In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) hosting fundraiser in off-ice
<b>B.</b> Full Name (Last, First, Middle Initial) Mary Ann Camilleri Mailing Address 70 Philson Court City Cheshire State CT Zip Code 06410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hospital for Special Care Occupation Senior VP, COO and General Cou Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1150.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35403 Amount of Each Receipt this Period 150.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Janice Carbonneau Mailing Address 54 Ridgewood Drive City Atkinson State NH Zip Code 03811 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Britain EMS Occupation Associate Director Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35569 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1650.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Daryl Carter

Mailing Address 4 Flagstone

City State Zip Code  
 Trabuco Canyon CA 92679

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CharterMac

Occupation  
CEO - Irvine office

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 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C35002

Amount of Each Receipt this Period

1000.00

Receipt

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

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

William Casazza

Mailing Address 229 Cold Spring Road

City State Zip Code  
 Avon CT 06001-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Attorney

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

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

Transaction ID: 60927.C35490

Amount of Each Receipt this Period

150.00

Receipt

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

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

Roberto Cascella

Mailing Address 64 9th Street Pier 7

City State Zip Code  
 Charlestown MA 02129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hologic Inc.

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35980

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2150.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Joseph Cassano

Mailing Address 32 Minuteman Hill

City State Zip Code  
Westport CT 06880-2373

FEC ID number of contributing federal political committee.

C

Name of Employer  
AIG Financial ProductsOccupation  
President/CEO

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

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34980

Amount of Each Receipt this Period

2000.00

Receipt

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

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

David Castellani

Mailing Address 203 Cold Spring Road

City State Zip Code  
Avon CT 06001-4057

FEC ID number of contributing federal political committee.

C

Name of Employer  
Prudential FinancialOccupation  
Sr. VP Distribution

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 6

Transaction ID: 60927.C35508

Amount of Each Receipt this Period

500.00

Receipt

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

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

Nicholas Cavarocchi

Mailing Address PO Box 617

City State Zip Code  
Oakland MD 21550

FEC ID number of contributing federal political committee.

C

Name of Employer  
Cavarocchi Ruscio Dennis  
AssocOccupation  
Partner

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

Election Cycle-to-Date ▼  
 2700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35575

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kirsten Chadwick		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 600 New Hampshire Ave., NW, Ste. 1		<b>Transaction ID:</b> 61006.C35998	
City State Zip Code Washington DC 20037		<b>Amount of Each Receipt this Period</b> 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Fierce, Isakowitz & Blalock Partner		Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>B.</b> Full Name (Last, First, Middle Initial) F. Nelson Chaffin		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address General Delivery		<b>Transaction ID:</b> 60830.C35090	
City State Zip Code Volcano HI 96785		<b>Amount of Each Receipt this Period</b> 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation requested Requested		Election Cycle-to-Date ▼ 200.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
<b>C.</b> Full Name (Last, First, Middle Initial) Anna Chamberland		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address PO Box 270		<b>Transaction ID:</b> 61006.C35760	
City State Zip Code Hartford CT 06141		<b>Amount of Each Receipt this Period</b> 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Northeast Utilities		Election Cycle-to-Date ▼ 300.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

**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)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Wiley Chambers

Mailing Address 2536 Queen Annes Lane, NW

City State Zip Code  
 Washington DC 20037-2148

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
USG - FDA

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  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34979

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Richard Chapman

Mailing Address 11200 Bodley Drive

City State Zip Code  
 Louisville KY 40223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kindred Healthcare

Occupation  
SVP, CAO, CIO

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 9 / 2 0 0 6

Transaction ID: 61006.C35884

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Robert Chaput

Mailing Address 9180 Brushboro Court

City State Zip Code  
 Brentwood TN 37027-6135

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Paragon Ventures Group

Occupation  
CEO

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35202

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Arnold Chase

Mailing Address 225 Asylum St., 29th Floor

City State Zip Code  
Hartford CT 06103-1538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Chase Enterprises

Occupation  
Businessman

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 6

Transaction ID: 60927.C35428

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Cheryl Chase

Mailing Address 225 Asylum St., 29th Floor

City State Zip Code  
Hartford CT 06103-1538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Chase Enterprises

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35430

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** David Chase

Mailing Address 225 Asylum St., 29th Floor

City State Zip Code  
Hartford CT 06103-1538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Chase Enterprises

Occupation  
Businessman

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 6

Transaction ID: 60927.C35429

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert Christie  
Mailing Address 1926 Middleton Drive

City State Zip Code  
Wheaton IL 60187

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northwestern Mem. Hosp

Occupation  
VP

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60927.C35500

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas Cigarran  
Mailing Address 5335 Stanford Drive

City State Zip Code  
Nashville TN 37215

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Healthways Inc.

Occupation  
Chairman

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35200

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
James Cleary  
Mailing Address 1132 Meriden Road

City State Zip Code  
Waterbury CT 06705-3629

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Meridan Manor Corp

Occupation  
Executive

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 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34851

Amount of Each Receipt this Period

500.00

Receipt

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

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

1250.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
William Clinger  
Mailing Address 418 N St Asaph Street

City State Zip Code  
Alexandria VA 22314-2318

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

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 6

Transaction ID: 60927.C35377

Amount of Each Receipt this Period

750.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Stephen Cloud  
Mailing Address 13727 West 82nd Street

City State Zip Code  
Lenexa KS 66215

FEC ID number of contributing federal political committee.

C

Name of Employer  
IBTOccupation  
President

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35638

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Herbert Collins  
Mailing Address 15 Clarendon Street

City State Zip Code  
Gloucester MA 01930

FEC ID number of contributing federal political committee.

C

Name of Employer  
Boston CapitalOccupation  
Chairman

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

Election Cycle-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35916

Amount of Each Receipt this Period

2100.00

Receipt

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

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

2950.00

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

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

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Amy Coloian

Mailing Address 36 Ruth Circle

City State Zip Code  
 Malvern PA 19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35221

Amount of Each Receipt this Period

250.00

Receipt

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

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

Peter Corr

Mailing Address 235 East 42nd St.

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pfizer

Occupation  
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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35063

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Leonard Cotton

Mailing Address 186 Indian Roack Road

City State Zip Code  
 New Canaan CT 06840-3631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ARCap REIT, Inc.

Occupation  
Chairman/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  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C35003

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2250.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lori Coughlin		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 4401 Upland Drive		<b>Transaction ID:</b> 61006.C35627
City Alexandria	State VA	Zip Code 22310
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Shawn Coughlin		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 1100 New York Ave., NW, Ste. 200M		<b>Transaction ID:</b> 61006.C35626
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer Capitol Health Group, LLC	Occupation Principal/COO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) James Cox-Chapman		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 229 Kenyon Street		<b>Transaction ID:</b> 60927.C35412
City Hartford	State CT	Zip Code 06106
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Pro Health Physicians	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

3700.00

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

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Darlee Crockett Mailing Address 7981 Prospect Place City La Jolla State CA Zip Code 92037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 08 / 24 / 2006 <b>Transaction ID:</b> 60830.C35255 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Martha Curt Mailing Address 7372 Goods Mill Road City Harrisonburg State VA Zip Code 22801 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C36024 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Peter DAddario Mailing Address 44 Tall Timbers Dr.. City Farmington State CT Zip Code 06032-3171 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35703 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2300.00**

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



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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert Dahl  
Mailing Address 1750 16th St., NW, #73

City State Zip Code  
Washington DC 20009

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 ▼

1000.00

Date of Receipt

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

Transaction ID: 60927.C35519

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Martha Davis  
Mailing Address 5050 S. Albion Street

City State Zip Code  
Littleton CO 80121-2006

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
environmental scientist

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 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34942

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Martha Davis  
Mailing Address 5050 S. Albion Street

City State Zip Code  
Littleton CO 80121-2006

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
environmental scientist

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  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34943

Amount of Each Receipt this Period

500.00

Receipt

☐ 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**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jonathan Dawson

Mailing Address 6 Shorehaven Road

City State Zip Code  
 Norwalk CT 06855

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dawson-Herman

Occupation  
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  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34926

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Jonathan Dawson

Mailing Address 6 Shorehaven Road

City State Zip Code  
 Norwalk CT 06855

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dawson-Herman

Occupation  
Chairman

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35953

Amount of Each Receipt this Period

1100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** John De Figueiredo

Mailing Address P.O. Box 573

City State Zip Code  
 Cheshire CT 06410-0573

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 ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35228

Amount of Each Receipt this Period

250.00

Receipt

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

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

2350.00

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

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Gregory DeManche  
 Mailing Address 49 W. Main Street

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer  
DeManche McChristian, LLCOccupation  
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 Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35234

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Gregory DeManche  
 Mailing Address 49 W. Main Street

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer  
DeManche McChristian, LLCOccupation  
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  
 0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35332

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Gregory DeManche  
 Mailing Address 49 W. Main Street

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer  
DeManche McChristian, LLCOccupation  
Attorney

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

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35758

Amount of Each Receipt this Period

250.00

Receipt

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

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

750.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Lyle Dennis

Mailing Address 11515 Noahs Landing Court

City

Manassas

State

VA

Zip Code

20112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cavarocchi Ruscio Dennis  
Assoc

Occupation

Partner

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35574

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Nancy Ann Deparle

Mailing Address 2914 Tennyson St., NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DaVita

Occupation

Board of Directors

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35095

Amount of Each Receipt this Period

800.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Jason Desantis

Mailing Address 30 Mark Twain Lane

City

Redding

State

CT

Zip Code

06896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Financial Products

Occupation

Finance

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34983

Amount of Each Receipt this Period

2100.00

Receipt

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

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

3900.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lorraine Desaulniers Mailing Address 7 Evergreen Drive City State Zip Code Wolcott CT 06716 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35899 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) David Deutch Mailing Address 12745 SW 71st Ave. City State Zip Code Miami FL 33156-3632 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Pinnacle Housing Group Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35213 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) S. Douglas Devnew Mailing Address 163 Sims Road City State Zip Code Bristol CT 06010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Trumpf Inc. VP Finance Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35770 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1325.00

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

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Anthony Disser

Mailing Address 704 Rudy Lane

City State Zip Code  
 Louisville KY 40207

FEC ID number of contributing federal political committee.

C

Name of Employer  
Kindred HealthcareOccupation  
Sr. VP Clinical Ops Hosp. Div.

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 9 / 2 0 0 6

Transaction ID: 61006.C35864

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Gloria Dittus

Mailing Address 2325 Wyoming Ave., NW

City State Zip Code  
 Washington DC 20008

FEC ID number of contributing federal political committee.

C

Name of Employer  
The Dittus GroupOccupation  
President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35787

Amount of Each Receipt this Period

400.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Linda Divall

Mailing Address 8305 Simsbury Place

City State Zip Code  
 Alexandria VA 22308

FEC ID number of contributing federal political committee.

C

Name of Employer  
American ViewPointOccupation  
Pollster

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  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35999

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1650.00

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Dixon		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 64 Pyquag Lane		<b>Transaction ID:</b> 60725.C34927
City Glastonbury	State CT	Zip Code 06033
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer requested 	Occupation Requested 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) John Dolan		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 35 Windy Ridge Road		<b>Transaction ID:</b> 60830.C35037
City Sharon	State CT	Zip Code 06069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired 	Occupation Retired 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) John Dolan		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 35 Windy Ridge Road		<b>Transaction ID:</b> 60927.C35441
City Sharon	State CT	Zip Code 06069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired 	Occupation Retired 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

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

400.00

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Dole Mailing Address 700 New Hampshire Ave., NW City Washington State DC Zip Code 20037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Alston & Bird Occupation special counsel Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35722 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Terrence Donahue Mailing Address 6 Timothy Way City Avon State CT Zip Code 06001-4078 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Britain Surgical Inc. Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35407 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Philip Dooly Mailing Address 176 Pine Grove Drive City Andrews State NC Zip Code 28901 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Haywood Bldrs & Realty Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35693 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1300.00

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 PageFOR LINE NUMBER: PAGE 145 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Douglas Mailing Address 709 N. Main St., PO Box 160 City State Zip Code Aynor SC 29511-3148 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Douglas Company Occupation builder - developer Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35573 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Dowsett Mailing Address 4 Langley Park City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Radiation Assoc Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35835 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth A. Dressler Mailing Address 7 Adams Place City State Zip Code Harrison NY 10528-1101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Medical Specialists of Fairfield Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34903 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**950.00****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 146 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Christine Dudley  
Mailing Address 3000 N. Sheridan, #18-D

City State Zip Code  
Chicago IL 60657

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Consultant

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60927.C35501

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
James Duggins  
Mailing Address 865 W. Dove Road

City State Zip Code  
Southlake TX 76092-3562

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ARCap REIT, Inc.

Occupation  
President/COO

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35085

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Peter Dunn  
Mailing Address 5 Farnham Way

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metro Realty Group

Occupation  
Construction

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 9 / 2 0 0 6

Transaction ID: 61006.C35880

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 147 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Edwin Durso		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1330 Adams Road		<b>Transaction ID:</b> 60830.C35124
City State Zip Code Hewlett Harbor NY 11557	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer ESPN	Occupation Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Henry Dyson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 12 Clover Hill Place		<b>Transaction ID:</b> 60830.C35022
City State Zip Code Kensington CT 06037-1139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 150.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Henry Dyson		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 12 Clover Hill Place		<b>Transaction ID:</b> 61006.C35824
City State Zip Code Kensington CT 06037-1139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

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

600.00

**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 PageFOR LINE NUMBER: PAGE 148 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Anna Eckersley-Johnson

Mailing Address 72 Park Drive

City

New Britain

State

CT

Zip Code

06053-2454

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Retired

Occupation

Retired

Receipt For: 2006

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	6

Transaction ID: 60830.C35188

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Anna Eckersley-Johnson

Mailing Address 72 Park Drive

City

New Britain

State

CT

Zip Code

06053-2454

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Retired

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
0	9		2	7		2	0	0	6

Transaction ID: 61006.C35705

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** William H. Ehlers

Mailing Address 125 Secret Lake Road

City

Avon

State

CT

Zip Code

06001

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
University of Connecticut

Occupation

Ophthalmologist

Receipt For: 2006

☐ Primary
 ☒ General
 ☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	0	6

Transaction ID: 60830.C35226

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1300.00

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 149 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Erhart Mailing Address 149 E. 73rd Street City New York State NY Zip Code 10021-3592 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35372 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Janet Errichetti Mailing Address PO Box 1264 City Middlebury State CT Zip Code 06762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Artist Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35042 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Joyce Errichetti Mailing Address 92 Chesham Drive City Middlebury State CT Zip Code 06762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Creative Management Realty Co Occupation owner/CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35044 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> 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 150 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Irwin Ettinger Mailing Address 631 Long Ridge Road, Unit 40 City State Zip Code Stamford CT 06902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer St. Paul Travelers Occupation Vice Chairman Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35056 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) David Evans Mailing Address 35 Sawmill Lane City State Zip Code Greenwich CT 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Greenwich Radiological Group Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35284 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Everets Mailing Address 72 Chestnut Street City State Zip Code Boston MA 02108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer HPSC Occupation Chairman Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C34976 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1250.00

**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 151 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Florence Fearrington		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 150 East 69th Street		<b>Transaction ID:</b> 60830.C35094
City New York	State NY	Amount of Each Receipt this Period 500.00
Zip Code 10021		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Florence Fearrington, Inc	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Featherstone		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 67 Holmes Road		<b>Transaction ID:</b> 60830.C35178
City Ridgefield	State CT	Amount of Each Receipt this Period 25.00
Zip Code 06877-4302		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 305.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Robert Featherstone		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 67 Holmes Road		<b>Transaction ID:</b> 60830.C35087
City Ridgefield	State CT	Amount of Each Receipt this Period 35.00
Zip Code 06877-4302		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 340.00	

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

560.00

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 PageFOR LINE NUMBER: PAGE 152 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Featherstone Mailing Address 67 Holmes Road City Ridgefield State CT Zip Code 06877-4302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 375.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60927.C35470 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table> Receipt <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	0	9		2	0		2	0	0	6	35.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	9		2	0		2	0	0	6																								
35.00																																	
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Featherstone Mailing Address 67 Holmes Road City Ridgefield State CT Zip Code 06877-4302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C35662 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">25.00</td> </tr> </table> Receipt <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	0	9		2	7		2	0	0	6	25.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	9		2	7		2	0	0	6																								
25.00																																	
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Featherstone Mailing Address 67 Holmes Road City Ridgefield State CT Zip Code 06877-4302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 435.00			Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61009.C36052 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">35.00</td> </tr> </table> Receipt <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	0	9		3	0		2	0	0	6	35.00									
M	M	/	D	D	/	Y	Y	Y	Y																								
0	9		3	0		2	0	0	6																								
35.00																																	

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

95.00

**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 153 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Joseph Feest

Mailing Address 99 Spruce Street

City State Zip Code  
 Meriden CT 06451-2614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ferrigno Insurance

Occupation  
insurance sales

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36058

Amount of Each Receipt this Period

200.00

Receipt

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

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

Anne Ferguson

Mailing Address 92 Half Mile Road

City State Zip Code  
 Darien CT 06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34974

Amount of Each Receipt this Period

200.00

Receipt

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

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

John Field

Mailing Address 132 Lower Church Hill Rd.

City State Zip Code  
 Washington CT 06794

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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 6

Transaction ID: 60927.C35462

Amount of Each Receipt this Period

250.00

Receipt

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

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 154 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Kristin Fitzgerald  
Mailing Address 1465 Briergate Drive

City State Zip Code  
Naperville IL 60563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Lobbyist

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 6

Transaction ID: 60927.C35502

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Kathi Fitzherbert  
Mailing Address Devereux Glenholme

City State Zip Code  
Washington CT 06793

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Devereux Glenholme School

Occupation  
Director of Admissions

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35153

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Sandra Foreman  
Mailing Address 14 Park Road

City State Zip Code  
Scarsdale NY 10583-2112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35133

Amount of Each Receipt this Period

500.00

Receipt

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

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

1250.00

**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 PageFOR LINE NUMBER: PAGE 155 / 414  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Donald Frahm Mailing Address 145 Deercliff Road City Avon State CT Zip Code 06001-2852 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 3600.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C35756 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table> Receipt <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	0	9		2	7		2	0	0	6	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		2	7		2	0	0	6																							
500.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Charles Frank Mailing Address PO Box 85 City Sharon State CT Zip Code 06069 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60830.C35186 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> Receipt <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	0	8		0	3		2	0	0	6	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	8		0	3		2	0	0	6																							
200.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) John Frey Mailing Address 825 Hollyhook Lane City Orange State CT Zip Code 06477 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60927.C35334 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">100.00</td> </tr> </table> Receipt <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	0	9		0	7		2	0	0	6	100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		0	7		2	0	0	6																							
100.00																																

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 156 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Mitchell Friedman  
 Mailing Address 14105 SW 72nd Court

City State Zip Code  
 Miami FL 33158

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Pinnacle Housing Group

Occupation  
 VP

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35212

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Richard Friedman  
 Mailing Address 82 N. Chatsworth Ave.

City State Zip Code  
 Larchmont NY 10538

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 BioScrip Inc.

Occupation  
 Chairman/CEO

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35130

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Alan Frost  
 Mailing Address 50 Lyons Plains Road

City State Zip Code  
 Westport CT 06880

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 AIG Financial Products

Occupation  
 Managing Director

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 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34984

Amount of Each Receipt this Period

2100.00

Receipt

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

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

3600.00

**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 157 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Furek		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 1370 Cutler Court		<b>Transaction ID:</b> 60725.C34892
City Marco Island	State FL	Zip Code 34145
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="500.00"/>
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2000.00"/>	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Furek		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 1370 Cutler Court		<b>Transaction ID:</b> 61006.C35902
City Marco Island	State FL	Zip Code 34145
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="2250.00"/>	

<b>C.</b> Full Name (Last, First, Middle Initial) Rafael Garcia		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 119 Rolling Meadow Road		<b>Transaction ID:</b> 60830.C35151
City Madison	State CT	Zip Code 06443-2309
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="350.00"/>	

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

**850.00**

**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 PageFOR LINE NUMBER: PAGE 158 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dean Garen Mailing Address 419 Scarborough Lane City State Zip Code Middletown CT 06457-8743 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kostin Ruffkess, LLC Occupation network engineer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35418 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Molly Garrett Mailing Address 7 Wyeth Drive City State Zip Code Bloomfield CT 06002 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35419 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Robert Garthwait Mailing Address P.O. Box 1367 City State Zip Code Waterbury CT 06721 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Cly-Del Co. Occupation President & CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 1 2 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34906 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**1300.00****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 159 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Pamela Garvie  
Mailing Address 202 N. Columbus St.

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Preston Gates Ellis & Rou-  
velas

Occupation  
Partner

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35578

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Martin Gavin  
Mailing Address 2 Saddle Crossing

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT Childrens Medical Cent-  
er

Occupation  
President

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

Election Cycle-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35768

Amount of Each Receipt this Period

150.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Richard Geismar  
Mailing Address 18 Hidden Brook Road

City State Zip Code  
Riverside CT 06878

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35696

Amount of Each Receipt this Period

100.00

Receipt

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

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

1250.00

**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 160 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Mary Gelormino

Mailing Address 235 Oakbrook Lane

City State Zip Code  
Torrington CT 06790

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36047

Amount of Each Receipt this Period

200.00

Receipt

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

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

David Gencarelli

Mailing Address 410 3rd Street SE 2

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gencarelli Group

Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35206

Amount of Each Receipt this Period

500.00

Receipt

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

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

David Gencarelli

Mailing Address 410 3rd Street SE 2

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gencarelli Group

Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36159

Amount of Each Receipt this Period

1500.00

Receipt

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

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

2200.00

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 161 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Geraci		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 10 Stonemeadow Dr		<b>Transaction ID:</b> 61009.C36049
City Westwood	State MA	Zip Code 02090
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Phoenix Investment Plans	Occupation President/CEO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) David Gingras		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 4731 Rood Road		<b>Transaction ID:</b> 61006.C35556
City Muskegon	State MI	Zip Code 49441
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hackley Hospital	Occupation St. VP/ CFO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Justin Ginsberg		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 200 E. 94th St., Apt 618		<b>Transaction ID:</b> 60830.C35082
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer CharterMac	Occupation Managing Director	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> 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 162 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Joe Giordano

Mailing Address 8 Round Hill Lane

City State Zip Code  
 Bridgewater CT 06752

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35331

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Nicholas Giordano

Mailing Address 8509 Sparger Street

City State Zip Code  
 Mc Lean VA 22102

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ernst & Young - Washington  
DC

Occupation  
Partner

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35096

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Thomas Glenormino

Mailing Address PO Box 104

City State Zip Code  
 Torrington CT 06790-0104

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
requested

Occupation  
Requested

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35156

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2200.00

**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 163 / 414

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Judith Godburn  
Mailing Address 78 Heritage Circle

City State Zip Code  
Southbury CT 06488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Secor Cassidy & McPartland  
PC

Occupation  
paralegal/office administrator

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

Election Cycle-to-Date ▼  
200.00

Date of Receipt

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

Transaction ID: 60927.C35482

Amount of Each Receipt this Period

200.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Patricia Goldman  
Mailing Address 3026 1/2 Q Street, NW

City State Zip Code  
Washington DC 20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35635

Amount of Each Receipt this Period

50.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Stanley Grant  
Mailing Address 81 Country Village

City State Zip Code  
New Hyde Park NY 11040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Congressional Glaucoma Ca-  
ucus

Occupation  
President/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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35142

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1250.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Grealy Mailing Address 312 Severn Avenue, Apt. 413E City State Zip Code Annapolis MD 21403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Health Leadership Council Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35986 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Brian Grogan Mailing Address 7 Brighton Lane City State Zip Code Simsbury CT 06070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Jefferson Radiology Occupation Radiologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61009.C36085 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Lisa Gross Mailing Address 3510 Matt Lane City State Zip Code Tyler TX 75701-8654 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation commercial real estate Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35119 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

950.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Edward Guay

Mailing Address 10 Birch Road

City State Zip Code  
 Bloomfield CT 06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consulting economist

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35183

Amount of Each Receipt this Period

200.00

Receipt

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

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

John Gummere

Mailing Address 27 Poplar Hill Drive

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35152

Amount of Each Receipt this Period

200.00

Receipt

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

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

John Gunn

Mailing Address 85 Wild Duck Road

City State Zip Code  
 Wilton CT 06897

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sloan Kettering Cancer Ce-  
nter

Occupation  
VP

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35140

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1400.00

**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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Haas		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 17119 Pilot Drive		<b>Transaction ID:</b> 60830.C35118
City Tyler	State TX	Zip Code 75707-7645
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer ET Blood & Cancer Center	Occupation Physician	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) James Haas		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 40 Old Hickory Road		<b>Transaction ID:</b> 60803.C34982
City Fairfield	State CT	Zip Code 06824-1925
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer AIG Financial Products	Occupation Managing Director	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Haase		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 175 Abbey Road		<b>Transaction ID:</b> 61006.C35557
City Birmingham	State MI	Zip Code 48009-5615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hackley Hospital	Occupation Sr. VP Human Resources	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2600.00

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Thomas Haines

Mailing Address P.O. Box 549, 84 Bunker Hill Road

City State Zip Code  
 Salisbury CT 06068-0549

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

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  
 0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34937

Amount of Each Receipt this Period

300.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Adele Hall

Mailing Address 5801 Oakwood Road

City State Zip Code  
 Shawnee KS 66208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
civic volunteer

Occupation  
civic volunteer

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 7 / 2 0 0 6

Transaction ID: 61006.C35727

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Jill Hall

Mailing Address P.O. Box 419580 , Dept 323

City State Zip Code  
 Kansas City MO 64141

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
civic volunteer

Occupation  
civic volunteer

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 7 / 2 0 0 6

Transaction ID: 61006.C35728

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2300.00

**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  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Norma Harris Mailing Address 32 Minuteman Hill City State Zip Code Westport CT 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C35001 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Marjorie Hart Mailing Address 133 East 64th Street City State Zip Code New York NY 10021-7045 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 750.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35370 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Veronica Hartnett Mailing Address 385 South Street City State Zip Code Middlebury CT 06762 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36061 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> 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 PageFOR LINE NUMBER: PAGE 169 / 414  
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
James Hawkins

Mailing Address 2506 North Quincy Street

City State Zip Code  
Arlington VA 22207-5043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alpine GroupOccupation  
Vice President

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 61006.C35886

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
William Healy

Mailing Address 8 Lawrence Road

City State Zip Code  
Merrimack NH 03054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hologic Inc.

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
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35977

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
David Heller

Mailing Address 60 Rydalwood Lane

City State Zip Code  
Chagrin Falls OH 44022-6870

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Multi Family House Builder

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

333.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	6

Transaction ID: 60830.C35209

Amount of Each Receipt this Period

333.00

Receipt

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

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

2333.00

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 170 / 414  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Douglas Heller		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 2 Old Orchard Road		<b>Transaction ID:</b> 60830.C35131
City Port Chester	State NY	Zip Code 10573
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Onyha	Occupation economist	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Henrikson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 153 Sunset Hill Rd.		<b>Transaction ID:</b> 60830.C35070
City New Canaan	State CT	Zip Code 06840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Metlife	Occupation Insurance	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Barbara Henry		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 74 Mallory Road		<b>Transaction ID:</b> 61006.C35688
City Roxbury	State CT	Zip Code 06783
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Town of Roxbury	Occupation 1st Select Woman	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

2600.00

**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 PageFOR LINE NUMBER: PAGE 171 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marie Herbst Mailing Address 175 Taylor Road City Cheshire State CT Zip Code 06410 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Intergrated Ind. Systems Occupation Secretary/Treasurer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35408 Amount of Each Receipt this Period 300.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Hermann Mailing Address 639 N. Saint Marys Lane, NW City Marietta State GA Zip Code 30064-1413 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NW Oncology Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35239 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Brad Herrington Mailing Address 12829 Stahl Drive City Knoxville State TN Zip Code 37922-0869 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hologic Inc. Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35983 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2900.00****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 PageFOR LINE NUMBER: PAGE 172 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Margaret Hill Mailing Address 785 Fifth Ave. City State Zip Code New York NY 10022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation theatre provider/attorney Election Cycle-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35120 Amount of Each Receipt this Period 350.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Raymond Hill Mailing Address P.O. Box 7318 City State Zip Code Kensington CT 06037 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer General Equities Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation President Election Cycle-to-Date ▼ 4100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35726 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Regina Hillsman Mailing Address 1771 Post Road East City State Zip Code Westport CT 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Physician Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35181 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2550.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 173 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Georgia Hitzke

Mailing Address One Devonshire Place, #3413

City State Zip Code  
 Boston MA 02109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hologic Inc.

Occupation  
VP Product Management

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 8 / 2 0 0 6

Transaction ID: 61006.C35802

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Roger Hoffman

Mailing Address 1612 S. Golf Glen, Unit F

City State Zip Code  
 Madison WI 53704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Finance

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 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35355

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Betty Hogin

Mailing Address 203 West Lyon Farm Drive

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35051

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**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 174 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Dawn Holcombe Mailing Address 33 Woodmar Circle City South Windsor State CT Zip Code 06074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Supportive Oncology Services Occupation healthcare advisor Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 <b>Transaction ID:</b> 60725.C34852 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Wilhelmina Holladay Mailing Address 3215 R Street NW City Washington State DC Zip Code 20007 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Volunteer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35903 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Theodore Hollander Mailing Address 19 Mauweehoo Hill City Sherman State CT Zip Code 06784 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Presray Corp Occupation Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 09 / 20 / 2006 <b>Transaction ID:</b> 60927.C35432 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1275.00

**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 175 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Gregory Howey

Mailing Address 580 Shuttle Meadow Avenue

City State Zip Code  
 New Britain CT 06052

FEC ID number of contributing federal political committee.

C

Name of Employer  
Okay IndustriesOccupation  
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 Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35427

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Hudson Housing Capital

Mailing Address 630 Fifth Ave., Ste. 2850

City State Zip Code  
 New York NY 10111

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 6

Transaction ID: 60927.C35311

Amount of Each Receipt this Period

750.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. John Zeiler

Mailing Address 630 Fifth Ave., Ste. 2850

City State Zip Code  
 New York NY 10111

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hudson Housing CapitalOccupation  
Partner

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 3 1 / 2 0 0 6

Transaction ID: 60927.C35322

Amount of Each Receipt this Period

300.00

Memo

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Partnership->Hudson Housi-  
ng Capital

SUBTOTAL of Receipts This Page (optional) .....

1250.00

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  
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FOR LINE NUMBER: PAGE 176 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Margaret Humleker

Mailing Address 633 Ledgeview Blvd.

City State Zip Code  
Fond Du Lac WI 54935-3726

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35261

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert Hunt

Mailing Address 130 Mallard Drive

City State Zip Code  
Avon CT 06001-4562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pepe & Hazard

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34888

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Hunton and Williams

Mailing Address Mr. John J. Adams  
1900 K Street, NW, 12th Floor

City State Zip Code  
Washington DC 20006-1109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hunton and Williams

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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36115

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 177 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine Ill Mailing Address 324 Brewster Road City Bristol State CT Zip Code 06010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35394 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Charles Irish Mailing Address 210 E. 68th St. City New York State NY Zip Code 10036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Reynders Gray & Co. Occupation Managing Director Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35128 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Jandernoa Mailing Address 2431 Belleglade SE City Grand Rapids State MI Zip Code 49546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Investor Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" 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 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35563 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> 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 PageFOR LINE NUMBER: PAGE 178 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Anna Jeffrey

Mailing Address 360 East 88th Street, Apt 24C

City	State	Zip Code
New York	NY	10028-4990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Musician
 Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	6

Transaction ID: 60830.C35180

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Anna Jeffrey

Mailing Address 360 East 88th Street, Apt 24C

City	State	Zip Code
New York	NY	10028-4990

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Musician
 Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

775.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35974

Amount of Each Receipt this Period

125.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Carl Johnson

Mailing Address 75 Mooreland Road

City	State	Zip Code
Kensington	CT	06037-1119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Berlin Steel Construc-  
tionOccupation  
President
 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	7		1	9		2	0	0	6

Transaction ID: 60725.C34938

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

725.00

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 179 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Carl Johnson

Mailing Address 75 Mooreland Road

City State Zip Code  
 Kensington CT 06037-1119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Berlin Steel Construc-  
tion

Occupation  
President

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36056

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Nancy Judd

Mailing Address 119 Ten Acre Road

City State Zip Code  
 New Britain CT 06052-1531

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35026

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Gregory Judge

Mailing Address 261 Clark Road

City State Zip Code  
 Brookline MA 02445

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MMA Financial

Occupation  
Sr. VP

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  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35078

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1200.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 180 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Barry Kahn		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 9014 Sandringham		Transaction ID: 60830.C35245
City Houston	State TX	Zip Code 77024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Tax Credits	Occupation Real Estate Developer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Otto Kaletsch		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 193 West Cornwall Road		Transaction ID: 61006.C35848
City West Cornwall	State CT	Zip Code 06796
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Leonard Kalman		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 6840 SW 101 Street		Transaction ID: 60830.C35065
City Miami	State FL	Zip Code 33156
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self Employed	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1700.00	

SUBTOTAL of Receipts This Page (optional) .....

2020.00

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 181 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Steven Kandarian

Mailing Address 25 Lenox Road

City State Zip Code  
 Summit NJ 07901-3704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metlife

Occupation  
Exec VP, Chief Invest. Officer

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35143

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Paul Kaywin

Mailing Address 13611 Deering Bay Drive, #401

City State Zip Code  
 Coral Gables FL 33158

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 ▼  
 1700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35066

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Carol Kelly

Mailing Address 3901 Highwood Court

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dept of HHS

Occupation  
policy director

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 6

Transaction ID: 60927.C35518

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 182 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Joan Kemler

Mailing Address 65 Norwood Rd.

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

08 / 24 / 2006

Transaction ID: 60830.C35225

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Joan Kemler

Mailing Address 65 Norwood Rd.

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

08 / 24 / 2006

Transaction ID: 60830.C35224

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Alice Kett

Mailing Address 110 Carlton Road

City State Zip Code  
Watsonville CA 95076-9405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

08 / 24 / 2006

Transaction ID: 60830.C35253

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 183 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kathleen Kies Mailing Address 6109 Franklin Park Road City State Zip Code McLean VA 22101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C34977 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Kim Mailing Address 7 North East Rd. City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Cigna Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35423 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Kimberly Mailing Address 1318 Skipwith Road City State Zip Code Mc Lean VA 22101-1834 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Kimberly Consulting President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4100.00		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35620 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**4600.00****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 184 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Eleanore Klapatch

Mailing Address 44 Arbor Court

City State Zip Code  
 Bristol CT 06010

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
City of Bristol

Occupation  
Registrar of Voters

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35531

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Paul Knag

Mailing Address 27 Miller Rd.

City State Zip Code  
 Darien CT 06820

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Murtha Cullina LLP

Occupation  
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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35123

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Robert Knapp

Mailing Address 2500 Oakwood SE

City State Zip Code  
 Grand Rapids MI 49506

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Laboratory Pathologists  
PC

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35559

Amount of Each Receipt this Period

250.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 185 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Thomas Knox

Mailing Address 118 Fuller Drive

City	State	Zip Code
W Hartford	CT	06117

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Self EmployedOccupation  
Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: 61006.C35658

Amount of Each Receipt this Period

25.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** William Kolbert

Mailing Address 15 Lords Hwy East

City	State	Zip Code
Weston	CT	06883

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
requestedOccupation  
Requested

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	8		0	3		2	0	0	6

Transaction ID: 60830.C35171

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Howard Koslow

Mailing Address 5698 Huntington Park Court

City	State	Zip Code
Boca Raton	FL	33496

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Promise HealthcareOccupation  
President/COO

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	9		2	0	0	6

Transaction ID: 61006.C35871

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2625.00

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 186 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Randall Krakauer

Mailing Address 29 Lorrie Lane

City State Zip Code  
 Princeton Junction NJ 08550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Medical Director - Medicare

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35053

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Randall Krakauer

Mailing Address 29 Lorrie Lane

City State Zip Code  
 Princeton Junction NJ 08550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Medical Director - Medicare

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35099

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

David Kreiss

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PolyMedica

Occupation  
Chief Govt Affairs

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35196

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 187 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Richard Kretz  
Mailing Address 77 Deepwood Drive

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kostin, Ruffkess, & Co.

Occupation  
Managing Partner

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35449

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
William Krupman  
Mailing Address 2 Ponds Lane

City State Zip Code  
Purchase NY 10577-1711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jackson Lewis

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  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34849

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Henry Kunhardt  
Mailing Address 161 West Mountain Road

City State Zip Code  
Washington CT 06793-1812

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35867

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**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 188 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Chun Kwok Mailing Address 300 Talcott Notch Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 <b>Transaction ID:</b> 60725.C34886 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) George LaCapra Mailing Address 1650 Litchfield Road City Watertown State CT Zip Code 06795-0303 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Quality Rolling & Deburning Co Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 575.00		Date of Receipt MM / DD / YYYY 07 / 26 / 2006 <b>Transaction ID:</b> 60803.C34999 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) George LaCapra Mailing Address 1650 Litchfield Road City Watertown State CT Zip Code 06795-0303 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Quality Rolling & Deburning Co Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 <b>Transaction ID:</b> 61006.C35855 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**325.00**

**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 189 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Tillie Laird

Mailing Address 265 East 66th Street Apt. 26-G

City State Zip Code  
 New York NY 10021-6408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2850.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34970

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Tillie Laird

Mailing Address 265 East 66th Street Apt. 26-G

City State Zip Code  
 New York NY 10021-6408

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3050.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35710

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** John Lamattina

Mailing Address 127 W. Wamphassuc Road

City State Zip Code  
 Stonington CT 06378

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pfizer

Occupation  
Executive

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35269

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1700.00

**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 190 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Andrew Langlois

Mailing Address 9 Tower Drive

City

Weston

State

CT

Zip Code

06883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mormac Marine Group

Occupation

Executive

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	6	/	2	0	0	6

Transaction ID: 60830.C35029

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** John Lapides

Mailing Address 217 St. Ronan Street

City

New Haven

State

CT

Zip Code

06511

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United Aluminum Corp.

Occupation

Manufacturer

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	7	/	2	0	0	6

Transaction ID: 61006.C35747

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** C. Raymond Larkin

Mailing Address 100 Warwick Court

City

Alamo

State

CA

Zip Code

94507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DaVita

Occupation

Board of Directors

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	8	/	1	6	/	2	0	0	6

Transaction ID: 60830.C35098

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 191 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Scott Larry

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Lockwood Companies

Occupation

Real Estate Developer

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35246

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Rod Laughlin

Mailing Address 2005 Westbourne Way

City

State

Zip Code

Alpharetta

GA

30022

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Regency Hospital Corp.

Occupation

President/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  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35924

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Leland Launer

Mailing Address PO Box 425, 41 Welsh Lane

City

State

Zip Code

New Vernon

NJ

07976-0425

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metlife

Occupation

President - Internatl Busines

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35136

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 192 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Benton Leach

Mailing Address 17-C Heritage Crest Drive

City State Zip Code  
 Southbury CT 06488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 212.50

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34873

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Robert Leary

Mailing Address 203 Clapboard Ridge Road

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Financial Products

Occupation  
Executive

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34987

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Richard Lechleiter

Mailing Address 601 Club Lane

City State Zip Code  
 Louisville KY 40207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kindred Healthcare

Occupation  
Accountant

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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35885

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 PageFOR LINE NUMBER: PAGE 193 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence Leder		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 9 / 2 0 0 6	
Mailing Address 929 Clint Moore Road		<b>Transaction ID:</b> 61006.C35872	
City Boca Raton	State FL	Zip Code 33487	<b>Amount of Each Receipt this Period</b> 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Promise Healthcare	Occupation CFO		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Kathryn Lehman		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 1101 S. Arlington Ridge Rd., #614		<b>Transaction ID:</b> 61006.C35745	
City Arlington	State VA	Zip Code 22202	<b>Amount of Each Receipt this Period</b> 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Holland & Knight	Occupation Attorney		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		
<b>C.</b> Full Name (Last, First, Middle Initial) David Lenihan		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6	
Mailing Address 124 Brookstone Drive		<b>Transaction ID:</b> 61009.C36157	
City New Haven	State CT	Zip Code 06540	<b>Amount of Each Receipt this Period</b> 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Caregain Inc.	Occupation Chairman/CEO		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**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 PageFOR LINE NUMBER: PAGE 194 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Lenihan Mailing Address 124 Brookstone Drive City State Zip Code New Haven CT 06540 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Caregain Inc. Chairman/CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61009.C36158 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Sandy Lerner Mailing Address PO Box 599 City State Zip Code Upperville VA 20185 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 1 9 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34944 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Levey Mailing Address 212 Copperwood Court City State Zip Code Millersville MD 21108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation MMA Financial Chief Capital Officer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35077 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> 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 195 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Alan Levin

Mailing Address PO Box 35714

City State Zip Code  
Houston TX 77235

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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35363

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Judith Lewent

Mailing Address PO Box 139

City State Zip Code  
Bernardsville NJ 07924

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Merck & Company, Inc.

Occupation  
Finance

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 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35350

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Karen Lewis

Mailing Address 5851 Upton Street

City State Zip Code  
Mc Lean VA 22101

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Southwest Airlines

Occupation  
Sr. Dir. Govt Affairs

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 7 / 2 0 0 6

Transaction ID: 61006.C35639

Amount of Each Receipt this Period

500.00

Receipt

☐ 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 PageFOR LINE NUMBER: PAGE 196 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Liebergall

Mailing Address 426 Frogtown Road

City State Zip Code  
New Canaan CT 06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Financial ProductsOccupation  
Managing Director

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	7		2	6		2	0	0	6

Transaction ID: 60803.C35009

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Cheryl Liette

Mailing Address 7690 Whispering Oaks Trail

City State Zip Code  
Tipp City OH 45371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Miller-Valentine GroupOccupation  
Real Estate Development

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	7		2	0	0	6

Transaction ID: 61006.C35580

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Lipscomb

Mailing Address PO Box 494

City State Zip Code  
Purchase NY 10577-0494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MetlifeOccupation  
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
0	7		2	6		2	0	0	6

Transaction ID: 60803.C34972

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 197 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Livshin		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 35 Ironwood Dr.		<b>Transaction ID:</b> 60927.C35463
City Danbury	State CT	Zip Code 06810
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer The Dagar Group Ltd.	Occupation President/CEO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Caitlin Long		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 401 E. 60th Street, Apt. 24D		<b>Transaction ID:</b> 60830.C35137
City New York	State NY	Zip Code 10022-1592
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Credit Suisse Group	Occupation Managing Director	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) William Longstreet		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 40 North Farms Road		<b>Transaction ID:</b> 60927.C35473
City Avon	State CT	Zip Code 06001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Dan Lufkin

Mailing Address 35 Hinkle Road

City State Zip Code  
 Washington Depot CT 06794

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Investor

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35061

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Robert Lundeen

Mailing Address P.O. Box 223

City State Zip Code  
 Deer Harbor WA 98243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35184

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Emily Sue Lynch

Mailing Address 104 East Street

City State Zip Code  
 Sharon CT 06069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35227

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 199 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** John Lynch

Mailing Address 7 Buttonwood Circle

City State Zip Code  
 Cheshire CT 06410

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ProHealth Physicians

Occupation  
Research

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 6

Transaction ID: 60927.C35411

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Michael Lynch

Mailing Address P.O. Box 502

City State Zip Code  
 Sharon CT 06069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sullivan Reis Sunchy and  
Perlo

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35041

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Susan Lynch

Mailing Address 8 Bayberry Lane

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35266

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 200 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** William MacNamara

Mailing Address 3 Farnham Ct

City

Westport

State

CT

Zip Code

06880-5024

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

marketing executive

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35243

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Janet Magnifico

Mailing Address PO Box 509

City

Litchfield

State

CT

Zip Code

06759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation

Requested

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 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36048

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** J. Michael Maher

Mailing Address 104 Grassy Hill Road

City

East Lyme

State

CT

Zip Code

06333-1010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pfizer Inc.

Occupation

Chemical Engineer

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35365

Amount of Each Receipt this Period

100.00

Earmarked(Receipt)

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

600.00

**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 201 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Pfizer Inc. PAC

Mailing Address Ms. Marjorie Finkelburg  
3

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pfizer PAC

Occupation

Receipt For: 2006

☐ Primary ☐ General  
☒ Other (specify) ▼  
Other

Election Cycle-to-Date ▼

10225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: CM120560927.C35365

Amount of Each Receipt this Period

100.00

Memo - Conduit memo total

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

Earmarked Memo - Conduit  
total

Full Name (Last, First, Middle Initial)

B. Rosemarie Maljanian

Mailing Address 32 Dunne Wood Court

City State Zip Code  
Unionville CT 06085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Magellan Health Services

Occupation  
Clinical Officer

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35204

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. James Mallozzi

Mailing Address 75 Ridgebury Road

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Financial

Occupation  
Sr. VP

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35644

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Manafort Mailing Address 509 Middle Road, Apt 322 City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35704 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Manning Mailing Address One Boston Place City Boston State MA Zip Code 02108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Boston Capital Occupation President/CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 4 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35244 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Christine Marks Mailing Address 78 Juniper Lane City Glastonbury State CT Zip Code 06033 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Prudential Financial Occupation VP Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35420 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**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 203 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Susan Marinelli

Mailing Address 4 Sunningdale

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35158

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Marion Marola

Mailing Address 489 East Street

City State Zip Code  
 Litchfield CT 06759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35457

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

J. Allen Martin

Mailing Address 10095 Lawyers Road

City State Zip Code  
 Vienna VA 22181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Livingston Group

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35567

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**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 204 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Martin Mailing Address 26 Marine Road City State Zip Code Boston MA 02127 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kevin P. Martin & Assoc Occupation CPA Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35914 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Kevin Martin Mailing Address 26 Marine Road City State Zip Code Boston MA 02127 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation CPA Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35915 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Patrick Martin Mailing Address 625 Madison Ave., 5th Floor City State Zip Code New York NY 10022 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CharterMac Occupation managing director - NY office Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C35007 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> 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 205 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Theodore Martland

Mailing Address 30 W. Main Street

City State Zip Code  
Waterbury CT 06702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35335

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Farrokh Mazdeyasna

Mailing Address 20 W. 64th St., 30P

City State Zip Code  
New York NY 10023

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
construction manager

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 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34971

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** William McClure

Mailing Address 701 13th Street NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
White & Case

Occupation  
Partner

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35605

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**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 206 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

John McConnell

Mailing Address 200 Old Wilson Bridge Road

City State Zip Code  
Columbus OH 43085-2247

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Worthington Industries

Occupation  
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  
0 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34919

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Frank McCoy

Mailing Address 4653 Stepping Stone Lane

City State Zip Code  
Kennesaw GA 30152-5487

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Oncology

Occupation  
Physician

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35237

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Frank McCoy

Mailing Address 4653 Stepping Stone Lane

City State Zip Code  
Kennesaw GA 30152-5487

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Oncology

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35238

Amount of Each Receipt this Period

500.00

Receipt

☐ 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 207 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Melanie McCue		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 140 Elbridge Road		<b>Transaction ID:</b> 60830.C35045
City New Britain	State CT	Zip Code 06052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Bruce McEver		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 198 Weatogue Road		<b>Transaction ID:</b> 60830.C35046
City Salisbury	State CT	Zip Code 06068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Berkshire Capital Corp.	Occupation Investment Banker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Thomas McGee		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 4 Westborough Drive		<b>Transaction ID:</b> 61006.C35764
City Simsbury	State CT	Zip Code 06089
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Petroleum Meter & Pump	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**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  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Kevin McGrath  
Mailing Address 8G Talcott Forest Road

City State Zip Code  
Farmington CT 06032

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 ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35189

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Margaret McKee  
Mailing Address 532 S. Brooksvale Rd.

City State Zip Code  
Cheshire CT 06410

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35718

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jo McKenzie  
Mailing Address 6 Wyeth Drive

City State Zip Code  
Bloomfield CT 06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35038

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** John McManus

Mailing Address 105 N. Galveston Street

City State Zip Code  
Arlington VA 22203-1205

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
the McManus Group

Occupation  
President

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35922

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** James McPartlon

Mailing Address 1015 Dibella Drive

City State Zip Code  
Schenectady NY 12303

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Ambulance Assn

Occupation  
President Elect

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 7 / 2 0 0 6

Transaction ID: 61006.C35568

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Bruce Mehlman

Mailing Address 10613 Morning Field Drive

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mehlman Castignetti

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35165

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bruce Meier		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6	
Mailing Address 327 Central Park West #5A		<b>Transaction ID:</b> 60830.C35129	
City New York	State NY	Zip Code 10025-7631	<b>Amount of Each Receipt this Period</b> 500.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer On-sight Psychological Service	Occupation Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Meijer		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address 2568 Fletcher NE		<b>Transaction ID:</b> 61006.C35564	
City Grand Rapids	State MI	Zip Code 49506	<b>Amount of Each Receipt this Period</b> 1000.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Life EMS Inc.	Occupation Executive		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Gary Memtesana		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6	
Mailing Address 180 Rugby Road		<b>Transaction ID:</b> 60830.C35079	
City Arnold	State MD	Zip Code 21012-2117	<b>Amount of Each Receipt this Period</b> 1000.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer requested	Occupation Requested		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Kathleen Metz

Mailing Address PO Box 728

City State Zip Code  
 Sharon CT 06069

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

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 Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35912

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Donald Meyer

Mailing Address 1821 N. Lincoln Park West

City State Zip Code  
 Chicago IL 60614

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CharterMac

Occupation  
Chief Investment Officer

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  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35084

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Timothy Meyer

Mailing Address 37 Old Kings Highway

City State Zip Code  
 Wilton CT 06897-3717

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
United Health Group

Occupation  
VP Government Relations

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 6

Transaction ID: 60927.C35374

Amount of Each Receipt this Period

500.00

Receipt

☐ 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  
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FOR LINE NUMBER: PAGE 212 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Brent Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 4207 South 7th Road		<b>Transaction ID:</b> 61006.C35836
City Arlington	State VA	Zip Code 22204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Marshfield Clinic	Occupation Dir. Fed. Govt Relations	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Donald Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 588 Roundhill Road		<b>Transaction ID:</b> 61006.C35724
City Greenwich	State CT	Zip Code 06831
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Axiom International	Occupation assets management	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3700.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Randi Miller		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 7 / 2 0 0 6
Mailing Address 21 Farm Meadow Road		<b>Transaction ID:</b> 60927.C35341
City Newtown	State CT	Zip Code 06470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

**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)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) William Miller Mailing Address 45 Blue Ridge Dr. City State Zip Code Simsbury CT 06089 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Oracle Elevator Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35459 Amount of Each Receipt this Period 200.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Adrienne Mitchell Mailing Address 165 Redwood Drive City State Zip Code Burlingame CA 94010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35351 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jerry Mitchell Mailing Address 5682 Rocky Shore Drive City State Zip Code Lewis Center OH 43035 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Mid-Ohio Oncology Oncologist Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35060 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 214 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Norbert Mitchell Mailing Address 7 High Ridge Rd. City Brookfield State CT Zip Code 06804-3514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Norbert E. Mitchell Co. Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C35964 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> Receipt <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	0	9		2	8		2	0	0	6	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		2	8		2	0	0	6																							
200.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Mlynarczyk Mailing Address 140 Overlook Avenue City New Britain State CT Zip Code 06053 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of Connecticut Occupation workers comp comm Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C35714 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table> Receipt <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	0	9		2	7		2	0	0	6	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		2	7		2	0	0	6																							
500.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) H Mogul Mailing Address PO Box 14 City Chappaqua State NY Zip Code 10514-0014 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60927.C35346 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> Receipt <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	0	9		0	7		2	0	0	6	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		0	7		2	0	0	6																							
1000.00																																

**SUBTOTAL** of Receipts This Page (optional) .....

1700.00

**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 PageFOR LINE NUMBER: PAGE 215 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Malcolm Mogul Mailing Address 31 Turner Drive City Chappaqua State NY Zip Code 10514 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60830.C35031 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">2100.00</td> </tr> </table> Receipt <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	0	8		1	6		2	0	0	6	2100.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	8		1	6		2	0	0	6																							
2100.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Susan Molinari Mailing Address 4004 Sharp Pl City Alexandria State VA Zip Code 22304 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Washington Group Occupation Chairman/CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C36000 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table> Receipt <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	0	9		3	0		2	0	0	6	1000.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		3	0		2	0	0	6																							
1000.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) Steve Monaghan Mailing Address 1909 W. Warner Ave. City Chicago State IL Zip Code 60613 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kindred Healthcare Occupation Exec VP West Group Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 61006.C35869 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">500.00</td> </tr> </table> Receipt <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	0	9		2	9		2	0	0	6	500.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	9		2	9		2	0	0	6																							
500.00																																

**SUBTOTAL** of Receipts This Page (optional) .....**3600.00****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 PageFOR LINE NUMBER: PAGE 216 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sylvia Montero

Mailing Address 325 7th St., NW, Ste. 1200

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
requestedOccupation  
Requested

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 8		0 3		2 0 0 6

Transaction ID: 60830.C35146

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Michael Montijo

Mailing Address 901 Bowring Park

City	State	Zip Code
Nashville	TN	37215-2455

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
HealthwaysOccupation  
Physician

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 8		0 3		2 0 0 6

Transaction ID: 60830.C35205

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Timothy Moore

Mailing Address 1790 Roundwyck Lane

City	State	Zip Code
Powell	OH	43065

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
Mid-Ohio OncologyOccupation  
Physician

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 8		1 6		2 0 0 6

Transaction ID: 60830.C35058

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional) .....

3100.00

**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 217 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jasper Morgan

Mailing Address 254 Halladay Avenue

City State Zip Code  
 Suffield CT 06078-1208

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35157

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Reto Morosani

Mailing Address P.O. Box 1045

City State Zip Code  
 Litchfield CT 06759

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
United Health Group

Occupation  
computer programmer

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 6

Transaction ID: 60927.C35362

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Thomas Morrison

Mailing Address 79 Valley Forge Road

City State Zip Code  
 Weston CT 06883-1946

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Patterson Belknap Webb et  
al

Occupation  
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 8 / 2 0 0 6

Transaction ID: 61006.C35840

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**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 218 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Richard Morrow

Mailing Address 200 East Randolph Drive, Suite 695

City State Zip Code  
 Chicago IL 60601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35716

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Edwin MquiggSeipp

Mailing Address 49 Tuscaloosa Avenue

City State Zip Code  
 Atherton CA 94027-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35967

Amount of Each Receipt this Period

300.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Gordon Mudler

Mailing Address 1554 E. Harbour Towne Circle

City State Zip Code  
 Muskegon MI 49441-6407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hackley Hospital

Occupation  
President/CEO

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 7 / 2 0 0 6

Transaction ID: 61006.C35560

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**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 219 / 414

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Carl Mueller Mailing Address 3 North Mill Street  City Nantucket State MA Zip Code 02554 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00	Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35159 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Glenn Muir Mailing Address 19 Dane Road  City Lexington State MA Zip Code 02421 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hologic Inc. Occupation CFO Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35982 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Beth Mullen Mailing Address 2701 F Street  City Sacramento State CA Zip Code 95816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Reznick, Fedder & Silverman Occupation Accountant Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	Date of Receipt MM / DD / YYYY 08 / 16 / 2006 <b>Transaction ID:</b> 60830.C35083 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ►	
<b>TOTAL</b> This Period (last page this line number only) ..... ►	

2500.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
James Muntz  
Mailing Address 126 Waterside Lane

City State Zip Code  
West Hartford CT 06107

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Northeast Utilities

Occupation  
Vice President

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35767

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Karen Myers  
Mailing Address 8213 Taunton Place

City State Zip Code  
Springfield VA 22152

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CA Inc

Occupation  
VP Government Relations

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 7 / 2 0 0 6

Transaction ID: 61006.C35570

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Frances Nelson  
Mailing Address 60 31st Avenue

City State Zip Code  
San Mateo CA 94403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Bohannon Development Co.

Occupation  
Executive

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35252

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 221 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jenny Netzer		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 57 Crescent Street		<b>Transaction ID:</b> 60830.C35080
City Cambridge	State MA	Zip Code 02138
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer MMA Financial	Occupation Executive VP	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Thomas J. Nicholas		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 379 Quarry Brook Drive		<b>Transaction ID:</b> 61006.C35699
City South Windsor	State CT	Zip Code 06074-3526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer requested	Occupation Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Charles Nirenberg		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 24 Deep Brook Harbor		<b>Transaction ID:</b> 61006.C35843
City Suffield	State CT	Zip Code 06078
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1200.00	

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**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 222 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Gordon Norman  
Mailing Address 1931 Port Edward Place

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Alere

Occupation  
CMO

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35163

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Rita Norton  
Mailing Address 3530 Pinetree Terrace

City State Zip Code  
Falls Church VA 22041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Amerisource Bergen

Occupation  
Govt 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  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35375

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Novak  
Mailing Address 4680 Ridge Walk Court

City State Zip Code  
Fort Lauderdale FL 33325

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kindred Healthcare

Occupation  
regional Sr. VP

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 9 / 2 0 0 6

Transaction ID: 61006.C35866

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 223 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Kathleen OConnor

Mailing Address 94 Garfield Rd

City State Zip Code  
W Hartford CT 06107-2910

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McKenna, Long & Aldrich

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35838

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Gerald O'Reilly

Mailing Address 199 Meadow Street

City State Zip Code  
Litchfield CT 06759-1156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35976

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

David Oakley

Mailing Address 875 Scotland Rd

City State Zip Code  
Norwich CT 06360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35841

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Theodore Okon

Mailing Address 30 Wintergreen Drive

City State Zip Code  
 Monroe CT 06468

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 ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35062

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

David Paletsky

Mailing Address 43 Benton Road

City State Zip Code  
 Morris CT 06763-1821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35048

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

George Palms

Mailing Address 18 Aspenwood Drive

City State Zip Code  
 Simsbury CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cigna

Occupation  
VP Product Management

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35643

Amount of Each Receipt this Period

350.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1850.00

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 PageFOR LINE NUMBER: PAGE 225 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Philip Pearson Mailing Address 44 Paul Spring Road City Farmington State CT Zip Code 06032-2439 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35702 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Harold Pennington Mailing Address 7 Bliss Road City New Preston State CT Zip Code 06777 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" 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 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35686 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Lee Perlman Mailing Address 10 Orsini Dr. City Larchmont State NY Zip Code 10538 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Grtr NY Hospial Assoc Occupation Hospital Administrator Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35144 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Pescatello Mailing Address 387 Old Mountain Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CT United for Research Excellence Occupation Attorney Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35765 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Phillips Peter Mailing Address 10805 Tara Road City Potomac State MD Zip Code 20854 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Reed Smith Shaw & McClay Occupation Lawyer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35746 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) William Petit Mailing Address 300 Sorghum Mill Drive City Cheshire State CT Zip Code 06410-3055 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Britain Gen. Hospital Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35337 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**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 227 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Shirley Pettis Mailing Address 151 Waterford Circle City Rancho Mirage State CA Zip Code 92270 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation retired US Congresswoman Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 24 / 2006 <b>Transaction ID:</b> 60830.C35263 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Steven Phillips Mailing Address 6205 Parkhill Drive City Alexandria State VA Zip Code 22312 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Piper Rudnick Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35162 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Phyllis Pierson Mailing Address 52 Hillcrest Rd. City Manchester State CT Zip Code 06040 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35719 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Samuel Pierson  
Mailing Address 52 Hillcrest Road

City State Zip Code  
Manchester CT 06040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ABA -PGI Inc.

Occupation  
President

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  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35720

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Marian Pillsbury  
Mailing Address 1100 Park Avenue

City State Zip Code  
New York NY 10128

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockefeller Fndtn

Occupation  
Foundation Execut.

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 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34968

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Douglas Poling  
Mailing Address 177 Golden Pond Lane

City State Zip Code  
Fairfield CT 06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIG Financial Products

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34986

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3600.00

**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 229 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ellen Pope		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 7232 Jones Parkway		<b>Transaction ID:</b> 60830.C35201
City Brentwood	State TN	Zip Code 37027-8531
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) William Popik		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 44 Old Stone Crossing		<b>Transaction ID:</b> 60725.C34920
City West Simsbury	State CT	Zip Code 06092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer AETNA	Occupation Doctor	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) James Prister		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 4120 Emporia Court		<b>Transaction ID:</b> 60927.C35503
City Naperville	State IL	Zip Code 60564
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RML Specialty Hospital	Occupation President & CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**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 230 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Prucker

Mailing Address 7864 Colonial Village Row

City State Zip Code  
 Annandale VA 22003

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Palmetto Group

Occupation  
Consultant

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 7 / 2 0 0 6

Transaction ID: 61006.C35576

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Samuel Pryor

Mailing Address 450 Lexington Avenue

City State Zip Code  
 New York NY 10017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35052

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Donald Quartel

Mailing Address 3220 Nebraska Ave., NW

City State Zip Code  
 Washington DC 20016

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Freight Desk Technologies

Occupation  
CEO

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36045

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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 231 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Raphael Mailing Address 11 Riverside Dr., Apt. 13LW City State Zip Code New York NY 10023 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Visiting Nurses Service of New Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation President and CEO Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 03 / 2006 <b>Transaction ID:</b> 60830.C35121 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) J. Michael Ratchford Mailing Address 17093 Lincoln City State Zip Code Grand Haven MI 49417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hackley Hospital Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation Sr. VP Medical Affairs - MD Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35561 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Rathgeber Mailing Address 98 Mooreland Road City State Zip Code Kensington CT 06037-1122 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CBIA Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation President Election Cycle-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35759 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**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 232 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Catherine Rein		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6
Mailing Address 21 East 22nd Street, Apt. 8B		<b>Transaction ID:</b> 60803.C34969
City New York	State NY	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Metlife	Occupation Sr. VP & CAO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Joan Reuter		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6
Mailing Address 9 Homestead Drive		<b>Transaction ID:</b> 61006.C35682
City Enfield	State CT	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Glen Reznikoff		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 11 Golf View Drive		<b>Transaction ID:</b> 60725.C34899
City Easton	State CT	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer requested	Occupation Requested	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

**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 233 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Linda Richards Mailing Address 1097 Snead City State Zip Code Troy MI 48085 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cancer Care Associates Occupation Executive Director Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 08 / 16 / 2006 <b>Transaction ID:</b> 60830.C35071 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Bernice Rieg Mailing Address 2 Eastland Drive City State Zip Code Manchester CT 06040 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 <b>Transaction ID:</b> 61006.C35706 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Willem Rijkse Mailing Address 37 Andrew Drive City State Zip Code Canton CT 06019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt MM / DD / YYYY 09 / 20 / 2006 <b>Transaction ID:</b> 60927.C35452 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2200.00

**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 234 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Susan Riley

Mailing Address 2808 M Kinney Ave., #845

City State Zip Code  
 Dallas TX 75204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AirLogix

Occupation  
CEO

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35270

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

David Robbins

Mailing Address 8 Monroe Road

City State Zip Code  
 Boston MA 01945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MMA Financial

Occupation  
Managing Director

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35081

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Mary Robertson

Mailing Address 28 Jewitt Hill Road

City State Zip Code  
 Sharon CT 06069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35043

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 PageFOR LINE NUMBER: PAGE 235 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mary Robertson Mailing Address 28 Jewitt Hill Road City Sharon State CT Zip Code 06069 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35329 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Hank Robinson Mailing Address 4110 Elmwood Circle City Louisville State KY Zip Code 40207 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kindred Healthcare Occupation Sr. VP Tax & Treasurer Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" 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 9 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35870 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Linda Romano Mailing Address 151 Ocean Avenue City Point Pleasant Beach State NJ Zip Code 08742 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35126 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> 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 236 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lewis Rome		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 16 High Hill Road		<b>Transaction ID:</b> 60830.C35154
City Bloomfield	State CT	Zip Code 06002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Rome, Case, Kennelly	Occupation Attorney	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Lewis Rome		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6
Mailing Address 16 High Hill Road		<b>Transaction ID:</b> 61006.C35842
City Bloomfield	State CT	Zip Code 06002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Rome, Case, Kennelly	Occupation Attorney	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1750.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Molly Roraback		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6
Mailing Address 608 Goshen Road, Box 223		<b>Transaction ID:</b> 61006.C35920
City Litchfield	State CT	Zip Code 06759
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Deborah Rosselli  
Mailing Address 250 Allison Drive

City State Zip Code  
Torrington CT 06790-3150

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

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 6

Transaction ID: 60927.C35464

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Gregg Rotenberg  
Mailing Address 2914 Jerrie Lane

City State Zip Code  
Glenview IL 60025

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
RCS

Occupation  
manager - technical services

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35913

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
James Rowan  
Mailing Address 150 Westledge Road

City State Zip Code  
West Simsbury CT 06092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
HSB Group Inc.

Occupation  
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  
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35863

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

950.00

**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 238 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

John D. Rubino

Mailing Address 277 Old Mountain Road

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35930

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Leonard Russ

Mailing Address 8 Windrush Lane

City State Zip Code  
 Westport CT 06880-2301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
nursing facility owner

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35122

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Richard Russell

Mailing Address 198 Hard Hill Road

City State Zip Code  
 Bethlehem CT 06751

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35712

Amount of Each Receipt this Period

250.00

Receipt

☐ 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 239 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Melanie Sabelhaus

Mailing Address 227 Greenspring Valley Road

City State Zip Code  
Owings Mills MD 21117-4118

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34975

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Geoffrey Sager

Mailing Address 15 White Oak Road

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metro Construction

Occupation  
Vice President

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 9 / 2 0 0 6

Transaction ID: 61006.C35879

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Mary Sargent

Mailing Address 25 Colony Road

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35689

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Julie Sargis

Mailing Address 70 Grove Hill Apt. 4W

City State Zip Code  
 New Britain CT 06050

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

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  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34882

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Leonard Schaeffer

Mailing Address 360 N. Bristol Ave.

City State Zip Code  
 Los Angeles CA 90049-2606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PacifiCare

Occupation  
Executive

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35027

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Albert Schiff

Mailing Address 11 Mohawk Lane

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self - employed

Occupation  
Life Underwriter

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35275

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1300.00

**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 241 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Alice Schneckenburger

Mailing Address P.O.Box 280

City

Sherman

State

CT

Zip Code

06784

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34884

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Frederick Schnell

Mailing Address 1300 Old Forsyth Road

City

Macon

State

GA

Zip Code

31210-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central Ga. Hematology On-  
colog

Occupation

Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34853

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Frederick Schnell

Mailing Address 1300 Old Forsyth Road

City

Macon

State

GA

Zip Code

31210-7205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Central Ga. Hematology On-  
colog

Occupation

Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35236

Amount of Each Receipt this Period

750.00

Receipt

☐ 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 242 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marc Schnitzer Mailing Address 21 Hampton Road City State Zip Code Scarsdale NY 10583 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CharterMac Pres & CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C35008 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) H. Marshall Schwarz Mailing Address 1220 Park Ave. City State Zip Code New York NY 10129 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C34967 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Alan Scott Mailing Address 4255 Vilamoura Drive City State Zip Code Avon OH 44011 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retailer Self Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 334.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35211 Amount of Each Receipt this Period 334.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1584.00

**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 243 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Nancy Scott  
Mailing Address 124 Cedarwood Drive

City State Zip Code  
New Britain CT 06052

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

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 Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35413

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Christobel Selecky  
Mailing Address 2983 Alexander Rd.

City State Zip Code  
Laguna Beach CA 92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LifeMasters

Occupation  
CEO

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  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35208

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ijaz Shafi  
Mailing Address 3 St. Andrew Drive

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
New Britain General

Occupation  
Ophthalmologist

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35354

Amount of Each Receipt this Period

200.00

Receipt

☐ 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 244 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Michael Shaw

Mailing Address 26 Deerfield Terrace

City State Zip Code  
 Burlington CT 06013-1514

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Otis Elevator

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 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35223

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Traci Shelton

Mailing Address 4138 Quiet Meadow Court

City State Zip Code  
 Fair Oaks CA 95628

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kindred Healthcare Inc.

Occupation  
Sr. 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  
 0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35868

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Victoria Shepard

Mailing Address 14 Compton Trace

City State Zip Code  
 Nashville TN 37215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Healthways

Occupation  
health administrator

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35199

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 245 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Bradford Sherburne

Mailing Address 22 Concord Street

City State Zip Code  
W Hartford CT 06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Pathology Assoc.

Occupation  
Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35701

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Charles Shivery

Mailing Address 3 Garnet Hill LN

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northeast Utilities

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  
0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35803

Amount of Each Receipt this Period

1100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Sharon Sidorov

Mailing Address 231 Sunbury Road

City State Zip Code  
Danville PA 17821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35195

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1450.00

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 246 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Robert Siegel

Mailing Address 26 Quail Hollow

City State Zip Code  
W Hartford CT 06117-1033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oncology Assoc.

Occupation  
Physician

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 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34901

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
James Silverwood

Mailing Address PO Box 3291

City State Zip Code  
Rancho Santa Fe CA 92067-3291

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boston Capital Corporation

Occupation  
Dir. of Corporate Communicatio

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 6

Transaction ID: 60927.C35509

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Steven Simmons

Mailing Address 66 Winding Lane

City State Zip Code  
Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Simmons Communications

Occupation  
CEO

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2666.66

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35511

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2200.00

**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 247 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Mimi Simoneaux Kneuer  
 Mailing Address 1419 Foxhall Rd., NW

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pharma Research

Occupation  
VP

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 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35929

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
 Scott Sleyster  
 Mailing Address 7 Farnham Way

City State Zip Code  
 Farmington CT 06032-1564

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Prudential Financial

Occupation  
VP

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  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35422

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
 Elizabeth Smith  
 Mailing Address 354 Pomerag Woods

City State Zip Code  
 Southbury CT 06488

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
New Britain General Hospi-  
tal

Occupation  
Executive

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 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34850

Amount of Each Receipt this Period

500.00

Receipt

☐ 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 248 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Keith Smith

Mailing Address 1409 Wayne St.

City

Alexandria

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BKSH & Associates

Occupation

Government Affairs

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 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34924

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

R. Craig Smith

Mailing Address 5153 Bluebonnet Blvd.

City

Baton Rouge

State

LA

Zip Code

70809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Essex Development

Occupation

President

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 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35917

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Lynette Snow

Mailing Address 23 Cedar Gate Road

City

Darien

State

CT

Zip Code

06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation

Homemaker

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 7 / 1 9 / 2 0 0 6

Transaction ID: 60725.C34939

Amount of Each Receipt this Period

2100.00

Receipt

☐ 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 249 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Thomas J. Soltis

Mailing Address 7 Butternut Lane

City State Zip Code  
 Weatogue CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hospital for Special Care

Occupation  
Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35399

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Jessica Soriano

Mailing Address 36 Wilkes Road

City State Zip Code  
 Danbury CT 06811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35453

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Jessica Soriano

Mailing Address 36 Wilkes Road

City State Zip Code  
 Danbury CT 06811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35454

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

350.00

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 PageFOR LINE NUMBER: PAGE 250 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ira Spar Mailing Address 2 Reservoir Road City Farmington State CT Zip Code 06032-2402 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35698 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Roger Spoelman Mailing Address 5305 Lake Harbor Road City Muskegon State MI Zip Code 49441 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mercy General Health Partners Occupation hospital president Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35558 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) James Spound Mailing Address 355 Riverside Drive City New York State NY Zip Code 10025 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CharterMac Occupation Exec. VP Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 7 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> 60803.C35005 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**1350.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Dorothy Sprague

Mailing Address 770 Park Ave.

City State Zip Code  
 New York NY 10021

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

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  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35125

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Robert Squire

Mailing Address 1516 East Main Street Unit 25

City State Zip Code  
 Meriden CT 06450

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Gardner Kerby Corp.

Occupation  
Insurance Agent

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35047

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

William Stahl

Mailing Address 267 Talcott Notch Rd.

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 0 7 / 2 0 0 6

Transaction ID: 60927.C35328

Amount of Each Receipt this Period

100.00

Receipt

☐ 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 252 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Steele

Mailing Address 59 Litchfield Road

City State Zip Code  
 Unionville CT 06085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Elder Health

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 Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35750

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Lynda Steere

Mailing Address 27471 Hargor Cove Ct.

City State Zip Code  
 Bonita Springs FL 34134

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35943

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** William Steere

Mailing Address 54 Island Drive

City State Zip Code  
 Rye NY 10580

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35944

Amount of Each Receipt this Period

2100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6300.00

**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 253 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jay Stein Mailing Address 314 Dartmouth St. City State Zip Code Boston MA 02116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hologic Inc. Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35981 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Stone Mailing Address 1936 Bristol CT City State Zip Code Brentwood TN 37027 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Healthways Inc. Occupation Chief Strategy Officer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35198 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) William Stortz Mailing Address 31 Oxbow Dr. City State Zip Code Bristol CT 06010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of Connecticut Occupation Manager Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35772 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> 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 254 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Candace Straight

Mailing Address 518 East Passaic Ave.

City State Zip Code  
 Bloomfield NJ 07003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Investment Banker

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  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35240

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Dorothy Straight

Mailing Address 518 East Passaic Ave.

City State Zip Code  
 Bloomfield NJ 07003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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  
 0 8 / 2 4 / 2 0 0 6

Transaction ID: 60830.C35241

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

John Strangfeld

Mailing Address 51 Post Lane

City State Zip Code  
 Bernardsville NJ 07924

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prudential Financial

Occupation  
Vice 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 Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35421

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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 255 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ada Strassenburgh

Mailing Address PO Box 608

City State Zip Code  
Ocean View NJ 08230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

07 / 12 / 2006

Transaction ID: 60725.C34848

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Ada Strassenburgh

Mailing Address PO Box 608

City State Zip Code  
Ocean View NJ 08230

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

09 / 30 / 2006

Transaction ID: 61006.C35909

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Barbara Street

Mailing Address 212 Chestnut Grove

City State Zip Code  
New Milford CT 06776

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

09 / 27 / 2006

Transaction ID: 61006.C35677

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**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 PageFOR LINE NUMBER: PAGE 256 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Thomas Strohmenger

Mailing Address 6 Hatheway Dr.

City

West Hartford

State

CT

Zip Code

06107-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aetna Inc.Occupation  
Attorney

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: 61006.C35761

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Mary Lou Strom

Mailing Address 17 Mathewson Avenue

City

Enfield

State

CT

Zip Code

06082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	0	6

Transaction ID: 60803.C34998

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Richard L. Sturdevant

Mailing Address 6 Westwood Terrace

City

Newtown

State

CT

Zip Code

06470

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35911

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

550.00

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 257 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Agustin Suarez

Mailing Address 1045 Florida Avenue

City State Zip Code  
 Slidell LA 70458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
H. O. S.

Occupation  
Physician

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 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34902

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. Gina Sullivan

Mailing Address 210 Locust St., Apt. 9B

City State Zip Code  
 Philadelphia PA 19106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Duane Morris LLP

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35732

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. Poohkothai Sundaram

Mailing Address 7165 Pleasant Colony Circle

City State Zip Code  
 Blacklick OH 43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid Ohio Oncology/Hematol-  
ogy.

Occupation  
Physician

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35057

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 258 / 414

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Barbara Swanson Mailing Address 119 Turtle Point Road City State Zip Code Tuxedo Park NY 10987 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35106 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Swanson Mailing Address 119 Turtle Point Road City State Zip Code Tuxedo Park NY 10987 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Ridgewood Renewable Power President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35107 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Valentine Taubner Mailing Address 45 Heywood Road City State Zip Code Pelham Manor NY 10803 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation BMC Corp. Engineer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35715 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> 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 259 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kurt Tauer		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address 2530 Johnson Road		<b>Transaction ID:</b> 60830.C35072
City Memphis	State TN	Zip Code 38139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2200.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Karen Tell		Date of Receipt M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 6
Mailing Address PO Box 781		<b>Transaction ID:</b> 60830.C35049
City Wilton	State CT	Zip Code 06897-0781
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Homemaker	Occupation Homemaker	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Theodore J. Theophilos		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 535 Woodside Avenue		<b>Transaction ID:</b> 60927.C35505
City Hinsdale	State IL	Zip Code 60521
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer A. C. Nelsen Company	Occupation Attorney	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 260 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lisa Thibdaue		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6	
Mailing Address PO Box 270		<b>Transaction ID:</b> 61006.C35766	
City Hartford	State CT	Amount of Each Receipt this Period 150.00	
Zip Code 06141		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Name of Employer Northeast Utilities		Occupation VP	
Election Cycle-to-Date ▼ 650.00			

<b>B.</b> Full Name (Last, First, Middle Initial) Ronne Thielen		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6	
Mailing Address 1977 Vista Caudal		<b>Transaction ID:</b> 60803.C35006	
City Newport Beach	State CA	Amount of Each Receipt this Period 1000.00	
Zip Code 92660-3915		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Name of Employer CharterMac		Occupation Executive VP	
Election Cycle-to-Date ▼ 1000.00			

<b>C.</b> Full Name (Last, First, Middle Initial) Gary Thompson		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 6 / 2 0 0 6	
Mailing Address 82 Lofgren Road		<b>Transaction ID:</b> 60803.C35000	
City Avon	State CT	Amount of Each Receipt this Period 500.00	
Zip Code 06001-3170		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C		Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Name of Employer Hartford Financial Services		Occupation Executive	
Election Cycle-to-Date ▼ 2000.00			

**SUBTOTAL** of Receipts This Page (optional) .....

1650.00

**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 261 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Mark Thompson  
Mailing Address 7175 Fox Lake Drive

City State Zip Code  
Blacklick OH 43004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mid-Ohio Oncology

Occupation  
Oncologist

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 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35059

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Victoria Toensing  
Mailing Address 5807 Hillburne Way

City State Zip Code  
Chevy Chase MD 20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DiGenova & Toensing

Occupation  
Attorney

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: 61006.C35966

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
William Toppeta  
Mailing Address 158 East 66th Street

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metlife

Occupation  
President International

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35138

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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 262 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Frederick Townsend

Mailing Address 11 Cole Drive

City State Zip Code  
 Wolcott CT 06716-2554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Townsend Co.

Occupation  
Investments

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35483

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Thomas Tran

Mailing Address 28 Spruce Lane

City State Zip Code  
 Simsbury CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Uniprise Inc

Occupation  
CFO

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 6

Transaction ID: 60927.C35378

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Anthony Trivella

Mailing Address 6 St. Michaels Court

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Steam Boiler Ins-  
pecti

Occupation  
Exec VP - Marketing

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35139

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2200.00

**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 263 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

John Troy

Mailing Address 11988 Colliers Reserve Drive

City State Zip Code  
 Naples FL 34110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35713

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Theodore Trump

Mailing Address 123 Laurelwood Ln

City State Zip Code  
 Southbury CT 06488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Praxair Inc.

Occupation  
Vice President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34891

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Leo Van Munching

Mailing Address 800 Hollow Tree Ridge Road

City State Zip Code  
 Darien CT 06820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35721

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1450.00

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 264 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Guy Vander Jagt

Mailing Address 9321 Cornwell Farm Drive

City State Zip Code  
 Great Falls VA 22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Baker & Hostetler

Occupation  
Attorney

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35694

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Sharon Vanmarter

Mailing Address 119 Century Drive

City State Zip Code  
 Syracuse NY 13209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
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  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35132

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Steven Villodas

Mailing Address 34 Tower Road

City State Zip Code  
 Brookfield CT 06804-3643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Intl Creative Data

Occupation  
President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 7 / 2 0 0 6

Transaction ID: 61006.C35751

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

800.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 265 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Eric Vonstetten

Mailing Address 198 Maple Street

City State Zip Code  
Stow MA 01775

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hologic Inc.

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
0	9		3	0		2	0	0	6

Transaction ID: 61006.C35978

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Sandeep Wadhwa

Mailing Address 2073 Eudora Street

City State Zip Code  
Denver CO 80207-3810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
McKesson Corp.Occupation  
Physician

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	8		0	3		2	0	0	6

Transaction ID: 60830.C35203

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Jeffrey Walker

Mailing Address P.O. Box 361

City State Zip Code  
Salisbury CT 06068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Transaction ID: 61006.C35691

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 266 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Susan Waltman

Mailing Address 256 Monterey Avenue

City State Zip Code  
 Pelham NY 10803

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grtr. New York Hosp. Asso-  
c.

Occupation  
General Counsel

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  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35134

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Grace Wang

Mailing Address 4601 University Drive

City State Zip Code  
 Coral Gables FL 33146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Medical Speciali-  
sts

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35067

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Jean Warren

Mailing Address 6610 Hillcrest Ave.

City State Zip Code  
 Oklahoma City OK 73116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

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  
 0 7 / 2 6 / 2 0 0 6

Transaction ID: 60803.C34990

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3000.00

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 PageFOR LINE NUMBER: PAGE 267 / 414  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Jean Warren Mailing Address 6610 Hillcrest Ave. City State Zip Code Oklahoma City OK 73116 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35717 Amount of Each Receipt this Period 800.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Pedro Wasmer Mailing Address 201 Old Academy Rd. City State Zip Code Fairfield CT 06430 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35117 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Eileen Watts Bosco Mailing Address 50 Woodward Road City State Zip Code Wolcott CT 06716 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35465 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**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 268 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lisa Weber Mailing Address 196 Anderson Ave. City State Zip Code Closter NJ 07624 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Metlife Occupation President, Individual Business Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35135 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Karen Weinstein Mailing Address 11 Anthony Ave. City State Zip Code Edison NJ 08820 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 8 / 0 3 / 2 0 0 6 <b>Transaction ID:</b> 60830.C35145 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Lisa Weiss Mailing Address 440 Lantern Way City State Zip Code Windsor CT 06095 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation health policy advisor Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35901 Amount of Each Receipt this Period 200.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**3200.00**

**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 269 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) William Wheeler Mailing Address 147 Brite Avenue City State Zip Code Scarsdale NY 10583 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Metlife Occupation EVP/CFO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>1000.00</div>		Date of Receipt <div>08 / 16 / 2006</div> <b>Transaction ID:</b> 60830.C35064 Amount of Each Receipt this Period <div>1000.00</div> <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John M. Whitcomb Mailing Address 198 Southern Blvd. City State Zip Code Danbury CT 06810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Whitcomb Business Corp Occupation Manager Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>500.00</div>		Date of Receipt <div>08 / 24 / 2006</div> <b>Transaction ID:</b> 60830.C35230 Amount of Each Receipt this Period <div>250.00</div> <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John M. Whitcomb Mailing Address 198 Southern Blvd. City State Zip Code Danbury CT 06810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Whitcomb Business Corp Occupation Manager Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div>600.00</div>		Date of Receipt <div>09 / 20 / 2006</div> <b>Transaction ID:</b> 60927.C35447 Amount of Each Receipt this Period <div>100.00</div> <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Richard White Mailing Address 660 Pennsylvania Ave. Suite 201 City Washington State DC Zip Code 20003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Alpine Group Occupation Partner Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35887 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Teddy White Mailing Address 10100 Ridgehill Terrace City Eden Prairie State MN Zip Code 55347 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Intercede Health Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> 60927.C35414 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Anthony Whitehead Mailing Address 7404 Steeplecrest Circle City Louisville State KY Zip Code 40222 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kindred Health Care PAC Occupation Sr. VP Finance Hospital Div. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> 61006.C35865 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Stephen Wieler

Mailing Address 11 Green Hill Road

City State Zip Code  
 Madison NJ 07940

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 2 0 / 2 0 0 6

Transaction ID: 60927.C35417

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

David Wilcox

Mailing Address 57 Highwood Road

City State Zip Code  
 South Glastonbury CT 06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wellcare

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 1 2 / 2 0 0 6

Transaction ID: 60725.C34890

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Alfred Wilke

Mailing Address 124 Higley Road

City State Zip Code  
 West Granby CT 06090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35028

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

700.00

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  
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FOR LINE NUMBER: PAGE 272 / 414  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

A. Full Name (Last, First, Middle Initial)

Michael Wohl

Mailing Address 9400 S. Dadeland Blvd., Ste. 100

City State Zip Code  
 Miami FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pinnacle Housing Group

Occupation  
Principal

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 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35215

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Ellen Wolfson

Mailing Address 9595 Journeys End Lane

City State Zip Code  
 Coral Gables FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

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  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35216

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Louis Wolfson

Mailing Address 9595 Journeys End Lane

City State Zip Code  
 Coral Gables FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Real Estate

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 3 / 2 0 0 6

Transaction ID: 60830.C35217

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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 273 / 414

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Zotos Mailing Address 49 Garfield Avenue City Danbury State CT Zip Code 06810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CT Labor Dept. Occupation research analyst Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 08 / 31 / 2006 <b>Transaction ID:</b> 60927.C35305 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Nicholas Zotos Mailing Address 49 Garfield Ave City Danbury State CT Zip Code 06810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer City of Danbury Occupation staff Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1100.00		Date of Receipt MM / DD / YYYY 08 / 31 / 2006 <b>Transaction ID:</b> 60927.C35304 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Nicholas Zotos Mailing Address 49 Garfield Ave City Danbury State CT Zip Code 06810 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer City of Danbury Occupation staff Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1600.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 <b>Transaction ID:</b> 61006.C35985 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		1500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		321275.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Goshen Republican Town Committee

Mailing Address Pie Hill Road

City State Zip Code  
Goshen CT 06756

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Goshen Republican Town Co-  
mmittee

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  
0 9 / 2 8 / 2 0 0 6

Transaction ID: 61006.C35801

Amount of Each Receipt this Period

150.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Republican National Committee

Mailing Address 310 First Street, S.E.

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer  
Republican National Commi-  
tee

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 6 / 2 0 0 6

Transaction ID: 60830.C35113

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Simsbury Republican Town Committee

Mailing Address 53 Highridge Road

City State Zip Code  
West Simsbury CT 06092

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Simsbury Republican Town  
Comm

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 / 3 0 / 2 0 0 6

Transaction ID: 61009.C36111

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5650.00

**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

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(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Southbury Republican Town Committee

Mailing Address P.O. Box 315

City State Zip Code  
Southbury CT 06488

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Southbury Republican Town  
Comm

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 6

Transaction ID: 61006.C35878

Amount of Each Receipt this Period

800.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Washington Republican Town Committee

Mailing Address P.O. Box 272

City State Zip Code  
Washington Dpt CT 06794

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington Republican Town  
Comm

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 6

Transaction ID: 60927.C35303

Amount of Each Receipt this Period

350.00

Receipt

☐ 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) .....

6800.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 276 / 414

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Sharp Pencil PAC Mailing Address 2875 Towerview Road, Ste. 1000 City Herndon State VA Zip Code 20171- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1111.11		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61206.C36881 Amount of Each Receipt this Period 1111.11 Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Ros-Lehtinen for Congress Mailing Address PO Box 522784 City Miami State FL Zip Code 33152-2784 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" 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 0 9 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61206.C36880 Amount of Each Receipt this Period 1000.00 Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Gregori Lebedev Mailing Address 2914 24th Road North City Arlington State VA Zip Code 22207- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Chemistry Council Occupation President Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 55.55		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 61206.C36879 Amount of Each Receipt this Period 55.55 Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		0.00
<b>TOTAL</b> 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 277 / 414

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Webster Bank Mailing Address 435 South Main Street City State Zip Code New Britain CT 06051- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 38372.34		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34945 Amount of Each Receipt this Period 1899.07 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Webster Bank Mailing Address 435 South Main Street City State Zip Code New Britain CT 06051- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 40393.90		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34946 Amount of Each Receipt this Period 2021.56 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Webster Bank Mailing Address 435 South Main Street City State Zip Code New Britain CT 06051- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 41333.99		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 2 1 / 2 0 0 6 <b>Transaction ID:</b> 60725.C34947 Amount of Each Receipt this Period 940.09 Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

4860.72

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 278 / 414

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Webster Bank

Mailing Address 435 South Main Street

City State Zip Code  
 New Britain CT 06051-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

42278.92

Date of Receipt

M M / D D / Y Y Y Y  
 0 7 / 2 8 / 2 0 0 6

Transaction ID: 60803.C34960

Amount of Each Receipt this Period

944.93

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Webster Bank

Mailing Address 435 South Main Street

City State Zip Code  
 New Britain CT 06051-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

43228.69

Date of Receipt

M M / D D / Y Y Y Y  
 0 8 / 0 4 / 2 0 0 6

Transaction ID: 60803.C35014

Amount of Each Receipt this Period

949.77

Other Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1894.70

**TOTAL** This Period (last page this line number only) .....

6755.42

# **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 279 / 414

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ace Printery

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

837.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

**B.** Ace Printery

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4724

Date of Disbursement

/   /

Amount of Each Disbursement this Period

731.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

**C.** Ace Printery

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4808

Date of Disbursement

/   /

Amount of Each Disbursement this Period

922.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**SUBTOTAL** of Disbursements This Page (optional) .....

2491.00

**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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ace Printery

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120-

Purpose of Disbursement  
PRINTING EXEC. STATIONARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4949

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

1139.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING EXEC. STATIONARY

Full Name (Last, First, Middle Initial)

**B.** Ace Printery

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120-

Purpose of Disbursement  
PRINTIN BUSINESS CARDS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4948

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

254.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTIN BUSINESS CARDS

Full Name (Last, First, Middle Initial)

**C.** Admin./Unemployment Compensation

Mailing Address P.O.Box 2931

City Hartford State CT Zip Code 06104-

Purpose of Disbursement  
UNEMPLOYMENT TAX

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4645

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

2475.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UNEMPLOYMENT TAX

**SUBTOTAL** of Disbursements This Page (optional) .....

3868.93

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Alverio Media

Mailing Address 15 Lewis St., Ste. 107

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61006.E4985

Date of Disbursement

/   /

Amount of Each Disbursement this Period

34500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**B.** American ViewPoint

Mailing Address 300 N. Lee Street, Ste. 400

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
POLLING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4431

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POLLING

Full Name (Last, First, Middle Initial)

**C.** American ViewPoint

Mailing Address 300 N. Lee Street, Ste. 400

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
POLING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POLING

**SUBTOTAL** of Disbursements This Page (optional) .....

62250.00

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Anthony's Lake Club

Mailing Address Thayer Pond Road

City  
Wilton

State  
CT

Zip Code  
06897-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4951

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2544.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**B.** Automated Mailmen

Mailing Address 141 South Main Street

City  
Beacon Falls

State  
CT

Zip Code  
06403-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4648

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**C.** Automated Mailmen

Mailing Address 141 South Main Street

City  
Beacon Falls

State  
CT

Zip Code  
06403-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4726

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16800.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

44344.00

**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 283 / 414

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Automated Mailmen**

Mailing Address 141 South Main Street

City Beacon Falls State CT Zip Code 06403-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4751

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

13427.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Averys Beverage**

Mailing Address 520 Corbin Ave

City New Britain State CT Zip Code 06052-

Purpose of Disbursement  
WATER COOLER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4414

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

12.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER COOLER RENTAL

Full Name (Last, First, Middle Initial)

## **C. Averys Beverage**

Mailing Address 520 Corbin Ave

City New Britain State CT Zip Code 06052-

Purpose of Disbursement  
WATER COOLER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4554

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

22.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER COOLER RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

13462.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Averys Beverage

Mailing Address 520 Corbin Ave

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
WATER COOLER REFILL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER COOLER REFILL

Full Name (Last, First, Middle Initial)

**B.** Averys Beverage

Mailing Address 520 Corbin Ave

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
WATER COOLER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4715

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER COOLER RENTAL

Full Name (Last, First, Middle Initial)

**C.** Averys Beverage

Mailing Address 520 Corbin Ave

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
COOLER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4763

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COOLER RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

34.88

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Averys Beverage

Mailing Address 520 Corbin Ave

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
COOLER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

37.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COOLER RENTAL

Full Name (Last, First, Middle Initial)

**B.** Nicole Awwad

Mailing Address 21 Eulid Ave.

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4423

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.77

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Nicole Awwad

Mailing Address 21 Eulid Ave.

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4559

Date of Disbursement

/   /

Amount of Each Disbursement this Period

85.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

172.72

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Nicole Awwad

Mailing Address 21 Eulid Ave.

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
REIMBURSE TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**B.** Nicole Awwad

Mailing Address 21 Eulid Ave.

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4575

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Nicole Awwad

Mailing Address 21 Eulid Ave.

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1009.79

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Nicole Awwad

Mailing Address 21 Euclid Ave.

City  
WaterburyState  
CTZip Code  
06710-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4625

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	0	/	2	0	0	6

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Janet Bailey

Mailing Address 11 Mill Street

City  
NantucketState  
MAZip Code  
02554-Purpose of Disbursement  
FUNDRAISING EVENT EXPENSES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.C35360IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	3	/	2	0	0	6

Amount of Each Disbursement this Period

1800.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53IN KIND: FUNDRAISING EVENT  
EXPENSES

Full Name (Last, First, Middle Initial)

**C.** Barkers Specialty

Mailing Address 27 Realty Drive

City  
CheshireState  
CTZip Code  
06410-Purpose of Disbursement  
PROMOTIONAL ITEMS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4415

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

43433.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PROMOTIONAL ITEMS

SUBTOTAL of Disbursements This Page (optional) .....

45483.65

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Barkers Specialty**

Mailing Address 27 Realty Drive

City Cheshire State CT Zip Code 06410-

Purpose of Disbursement  
BAG SIGNS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4764

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4648.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BAG SIGNS

Full Name (Last, First, Middle Initial)

## **B. Barkers Specialty**

Mailing Address 27 Realty Drive

City Cheshire State CT Zip Code 06410-

Purpose of Disbursement  
LAWN SIGNS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4915

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18232.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LAWN SIGNS

Full Name (Last, First, Middle Initial)

## **C. Bay Leaf Gourmet**

Mailing Address 144 W. Main Street

City Waterbury State CT Zip Code 06702-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

598.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

23479.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** James Belforti

Mailing Address 49 Meadow View Court

City  
Watertown

State  
CT

Zip Code  
06795-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4580

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** James Belforti

Mailing Address 49 Meadow View Court

City  
Watertown

State  
CT

Zip Code  
06795-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4654

Date of Disbursement

/   /

Amount of Each Disbursement this Period

119.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** James Belforti

Mailing Address 49 Meadow View Court

City  
Watertown

State  
CT

Zip Code  
06795-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4743

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1966.90

**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  
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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** James Belforti

Mailing Address 49 Meadow View Court

City  
WatertownState  
CTZip Code  
06795-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4802

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	0	6

Amount of Each Disbursement this Period

461.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Susan Bevan

Mailing Address Field Point Park

City  
GreenwichState  
CTZip Code  
06830-Purpose of Disbursement  
EVENT EXPENSES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.C35011IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	6

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: EVENT EXPENSES

Full Name (Last, First, Middle Initial)

**C.** Judy Biggert for Congress

Mailing Address P.O. Box 637

City  
HinsdaleState  
ILZip Code  
60522-Purpose of Disbursement  
CATERING FOR 8/24/06 EVENT

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.C35532IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	6

Amount of Each Disbursement this Period

853.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53IN KIND: CATERING FOR 8/2-  
4/06 EVENT

SUBTOTAL of Disbursements This Page (optional) .....

1815.32

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David Boomer

Mailing Address 128 N. 13th Street, #403

City  
Lincoln

State  
NE

Zip Code  
68508-

Purpose of Disbursement  
JULY CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4412

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

JULY CONSULTING

Full Name (Last, First, Middle Initial)

**B.** Mr. David Boomer

Mailing Address 128 N. 13th Street, #403

City  
Lincoln

State  
NE

Zip Code  
68508-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4551

Date of Disbursement

/   /

Amount of Each Disbursement this Period

285.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mr. David Boomer

Mailing Address 128 N. 13th Street, #403

City  
Lincoln

State  
NE

Zip Code  
68508-

Purpose of Disbursement  
AUGUST CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4660

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AUGUST CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

13285.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David Boomer

Mailing Address 128 N. 13th Street, #403

City Lincoln State NE Zip Code 68508-

Purpose of Disbursement  
REIMBURSE FOOD/BEVERAGE/TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4766

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE FOOD/BEVERAGE/T-  
RAVEL

Full Name (Last, First, Middle Initial)

**B.** Mr. David Boomer

Mailing Address 128 N. 13th Street, #403

City Lincoln State NE Zip Code 68508-

Purpose of Disbursement  
SEPTEMBER CONSULTING FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEPTEMBER CONSULTING FEE

Full Name (Last, First, Middle Initial)

**C.** C2 Group, LLC

Mailing Address 101 Constitution Ave., NW, Ste. 90

City Washington State DC Zip Code 20001-

Purpose of Disbursement  
HOSTING FUNDRAISER IN OFFICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61006.C35955IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: HOSTING FUNDRAIS-  
ER IN OFFICE

**SUBTOTAL** of Disbursements This Page (optional) .....

7800.49

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Mailing Address 300 First Street, SE

City  
WashingtonState  
DCZip Code  
20003-Purpose of Disbursement  
CATERING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4557

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	0	/	2	0	0	6

Amount of Each Disbursement this Period

3737.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Mailing Address 300 First Street, SE

City  
WashingtonState  
DCZip Code  
20003-Purpose of Disbursement  
CATERING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4791

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	6

Amount of Each Disbursement this Period

275.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**C. Capstone Properties**

Mailing Address 101 Cambridge Ave, Suite 310

City  
BurlingtonState  
MAZip Code  
01803-Purpose of Disbursement  
RENT

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4433

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

1850.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

SUBTOTAL of Disbursements This Page (optional) .....

5863.38

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Capstone Properties**

Mailing Address 101 Cambridge Ave, Suite 310

City Burlington State MA Zip Code 01803-

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4661

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

## **B. Capstone Properties**

Mailing Address 101 Cambridge Ave, Suite 310

City Burlington State MA Zip Code 01803-

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4813

Date of Disbursement

/   /

Amount of Each Disbursement this Period

850.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

## **C. Cingular Wireless**

Mailing Address P.O. Box 8177

City New Haven State CT Zip Code 06530-

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

161.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

1861.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING PASSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4413

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

385.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING PASSES

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4411

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4446

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

**SUBTOTAL** of Disbursements This Page (optional) .....

685.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PERSONAL PROPERTY TAX

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60710.E4393

Date of Disbursement

07 / 06 / 2006

Amount of Each Disbursement this Period

169.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PERSONAL PROPERTY TAX

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4595

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4628

Date of Disbursement

07 / 24 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

**SUBTOTAL** of Disbursements This Page (optional) .....

569.02

**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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKIND PASS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4641

Date of Disbursement

07 / 25 / 2006

Amount of Each Disbursement this Period

525.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKIND PASS

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING PASS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4725

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING PASS

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4750

Date of Disbursement

08 / 14 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

**SUBTOTAL** of Disbursements This Page (optional) .....

825.00

**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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4795

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING PASSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4812

Date of Disbursement

/   /

Amount of Each Disbursement this Period

455.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING PASSES

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

**SUBTOTAL** of Disbursements This Page (optional) .....

855.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City State Zip Code  
New Britain CT 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 61006.E4967

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

Full Name (Last, First, Middle Initial)

**B.** CL&P

Mailing Address PO Box 270

City State Zip Code  
Hartford CT 06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1591.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

Full Name (Last, First, Middle Initial)

**C.** CL&P

Mailing Address PO Box 270

City State Zip Code  
Hartford CT 06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4662

Date of Disbursement

/   /

Amount of Each Disbursement this Period

965.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

**SUBTOTAL** of Disbursements This Page (optional) .....

2756.86

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Lester Cooper

Mailing Address 3539 South Utah Street

City State Zip Code  
Arlington VA 22206-

Purpose of Disbursement  
RESEARCH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1937.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RESEARCH

Full Name (Last, First, Middle Initial)

**B.** Mindy Crane

Mailing Address 147 Ancient Oak Road

City State Zip Code  
Bethlehem CT 06751-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

461.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mindy Crane

Mailing Address 147 Ancient Oak Road

City State Zip Code  
Bethlehem CT 06751-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4653

Date of Disbursement

/   /

Amount of Each Disbursement this Period

101.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

2501.16

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mindy Crane

Mailing Address 147 Ancient Oak Road

City  
Bethlehem

State  
CT

Zip Code  
06751-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4745

Date of Disbursement

/   /

Amount of Each Disbursement this Period

461.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mindy Crane

Mailing Address 147 Ancient Oak Road

City  
Bethlehem

State  
CT

Zip Code  
06751-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4835

Date of Disbursement

/   /

Amount of Each Disbursement this Period

128.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mindy Crane

Mailing Address 147 Ancient Oak Road

City  
Bethlehem

State  
CT

Zip Code  
06751-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

738.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1329.14

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. CT Commissioner of Revenue Services**

Mailing Address P.O.Box 2931

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60830.E4646**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

947.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

## **B. Davis, Mascola, and Phillips**

Mailing Address 1062 Barnes Road  
ste 203

City  
Wallingford

State  
CT

Zip Code  
06492-

Purpose of Disbursement  
ACCOUNTING SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60928.E4897**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

230.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ACCOUNTING SERVICE

Full Name (Last, First, Middle Initial)

## **C. Timothy DeCarlo**

Mailing Address 77 walnut Hill Road

City  
Bethel

State  
CT

Zip Code  
06801-1310

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 61006.E4991**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

933.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2110.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. District Supply Center**

Mailing Address 2711 Buford Rd., Ste. 407

City Richmond State VA Zip Code 23235-

Purpose of Disbursement  
PRINTER TONER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4755

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

428.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTER TONER

Full Name (Last, First, Middle Initial)

## **B. EDONATION.com**

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
CHARGEBACK FOR 4/24/06

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4448

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

275.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CHARGEBACK FOR 4/24/06

Full Name (Last, First, Middle Initial)

## **C. EDONATION.com**

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4772

Date of Disbursement

08 / 03 / 2006

Amount of Each Disbursement this Period

8.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT & SERVICE FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

711.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4636

Date of Disbursement

08 / 16 / 2006

Amount of Each Disbursement this Period

8.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**MERCHANT & SERVICE FEES**

Full Name (Last, First, Middle Initial)

**B.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4637

Date of Disbursement

08 / 16 / 2006

Amount of Each Disbursement this Period

47.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**MERCHANT & SERVICE FEES**

Full Name (Last, First, Middle Initial)

**C.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4826

Date of Disbursement

09 / 20 / 2006

Amount of Each Disbursement this Period

147.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**MERCHANT & SERVICE FEES**

**SUBTOTAL** of Disbursements This Page (optional) .....

202.80

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4825

Date of Disbursement

09 / 20 / 2006

Amount of Each Disbursement this Period

22.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT & SERVICE FEES

Full Name (Last, First, Middle Initial)

**B.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4962

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

61.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT & SERVICE FEES

Full Name (Last, First, Middle Initial)

**C.** EDONATION.com

Mailing Address 228 S. Washington St.

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
MERCHANT & SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E5000

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

4.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MERCHANT & SERVICE FEES

**SUBTOTAL** of Disbursements This Page (optional) .....

87.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Elm Hill Pizza

Mailing Address 625 Maple Hill Avenue

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

91.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

**B.** Elm Hill Pizza

Mailing Address 625 Maple Hill Avenue

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.66

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

**C.** Elm Hill Pizza

Mailing Address 625 Maple Hill Avenue

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4665

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FOOD & BEVERAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

222.07

**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  
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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Executive Cuisine**

Mailing Address 12 Elm Street

City  
New MilfordState  
CTZip Code  
06776-Purpose of Disbursement  
CATERING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4788

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	1	/	2	0	0	6

Amount of Each Disbursement this Period

528.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address P.O.Box 1140

City  
MemphisState  
TNZip Code  
38101-1140Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4429

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

427.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address P.O.Box 1140

City  
MemphisState  
TNZip Code  
38101-1140Purpose of Disbursement  
SHIPPLING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60710.E4394

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

109.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPLING

SUBTOTAL of Disbursements This Page (optional) .....

1065.42

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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4609

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4639

Date of Disbursement

/   /

Amount of Each Disbursement this Period

205.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4649

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

**SUBTOTAL** of Disbursements This Page (optional) .....

453.46

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4718

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

108.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4765

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

125.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4792

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

85.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

**SUBTOTAL** of Disbursements This Page (optional) .....

319.44

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4809

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4833

Date of Disbursement

/   /

Amount of Each Disbursement this Period

43.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

36.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

**SUBTOTAL** of Disbursements This Page (optional) .....

119.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City State Zip Code  
 Memphis TN 38101-1140

Purpose of Disbursement  
 SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **B. Goshen Agricultural Society**

Mailing Address P.O Box 278

City State Zip Code  
 Goshen CT 06756-

Purpose of Disbursement  
 BOOTH AT FAIR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

BOOTH AT FAIR

Full Name (Last, First, Middle Initial)

## **C. Chris Griebel**

Mailing Address 7 Caryn Lane

City State Zip Code  
 Weatogue CT 06089-

Purpose of Disbursement  
 REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4419

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

**397.10**

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Chris Griebel

Mailing Address 7 Caryn Lane

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

130.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Chris Griebel

Mailing Address 7 Caryn Lane

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4572

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Chris Griebel

Mailing Address 7 Caryn Lane

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4810

Date of Disbursement

/   /

Amount of Each Disbursement this Period

693.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1747.39

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Donna Hamzy

Mailing Address 19 Dover Road

City New Britain State CT Zip Code 06052-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

255.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

Full Name (Last, First, Middle Initial)

**B.** Donna Hamzy

Mailing Address 19 Dover Road

City New Britain State CT Zip Code 06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

127.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Donna Hamzy

Mailing Address 19 Dover Road

City New Britain State CT Zip Code 06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4585

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1801.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2183.00

**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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4655

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

Full Name (Last, First, Middle Initial)

**C.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

148.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

652.07

**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 Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4737

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2056.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4909

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

Full Name (Last, First, Middle Initial)

**C.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4941

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2056.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

4366.07

**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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Hartford Club

Mailing Address 46 Prospect Street

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4451

Date of Disbursement

/   /

Amount of Each Disbursement this Period

427.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**B.** Hartford Club

Mailing Address 46 Prospect Street

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
EVENT EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4776

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7350.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

EVENT EXPENSE

Full Name (Last, First, Middle Initial)

**C.** Hartford Publications

Mailing Address unknown

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
AD BOOK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4832

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

AD BOOK

**SUBTOTAL** of Disbursements This Page (optional) .....

8078.78

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Harvard Club of NYC

Mailing Address 27 West 44th Street

City  
New York

State  
NY

Zip Code  
10036-6645

Purpose of Disbursement  
EVENT EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4593

Date of Disbursement

07 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

EVENT EXPENSE

Full Name (Last, First, Middle Initial)

**B.** Tiffany Higgins

Mailing Address 42 Woodside Drive

City  
Unionville

State  
CT

Zip Code  
06085-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4589

Date of Disbursement

07 / 15 / 2006

Amount of Each Disbursement this Period

461.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Tiffany Higgins

Mailing Address 42 Woodside Drive

City  
Unionville

State  
CT

Zip Code  
06085-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4783

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

277.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1738.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Hilton Hotel

Mailing Address 315 Trumbull Street

City Hartford State CT Zip Code 06103-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4947

Date of Disbursement

09 / 19 / 2006

Amount of Each Disbursement this Period

228.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**B.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City Canton State CT Zip Code 06019-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4445

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

26.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City Canton State CT Zip Code 06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4584

Date of Disbursement

07 / 15 / 2006

Amount of Each Disbursement this Period

1167.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1421.37

**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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City State Zip Code  
Canton CT 06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4602

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1478.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City State Zip Code  
Canton CT 06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4784

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5291.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City State Zip Code  
Canton CT 06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4932

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7003.06

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

13772.69

**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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Hocon Gas Inc

Mailing Address 715 Boston Post Road

City Guilford State CT Zip Code 06437-

Purpose of Disbursement  
CYLINDER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CYLINDER RENTAL

Full Name (Last, First, Middle Initial)

**B.** Hocon Gas Inc

Mailing Address 715 Boston Post Road

City Guilford State CT Zip Code 06437-

Purpose of Disbursement  
TANK RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TANK RENTAL

Full Name (Last, First, Middle Initial)

**C.** Hocon Gas Inc

Mailing Address 715 Boston Post Road

City Guilford State CT Zip Code 06437-

Purpose of Disbursement  
TANK RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4762

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TANK RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

22.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Human Rights Campaign PAC**Mailing Address Mr. Michael Mings  
1640 Rhode Island Ave, N.W.

City Washington State DC Zip Code 20036-

Purpose of Disbursement  
ENDORSEMENT ON WEBSITE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.C36162IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	5		2	0	0	6

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53IN KIND: ENDORSEMENT ON  
WEBSITE

Full Name (Last, First, Middle Initial)

**B. Internal Revenue Service**

Mailing Address Main Street

City Hartford State CT Zip Code 06105-

Purpose of Disbursement  
3RD QTR PAYROLL TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4592

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	3		2	0	0	6

Amount of Each Disbursement this Period

4618.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

3RD QTR PAYROLL TAXES

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address Main Street

City Hartford State CT Zip Code 06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4647

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	6		2	0	0	6

Amount of Each Disbursement this Period

9373.79

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

SUBTOTAL of Disbursements This Page (optional) .....

14016.95

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Internal Revenue Service**

Mailing Address Main Street

City Hartford State CT Zip Code 06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4644

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

13991.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

Full Name (Last, First, Middle Initial)

## **B. Internal Revenue Service**

Mailing Address Main Street

City Hartford State CT Zip Code 06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4643

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

9835.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

Full Name (Last, First, Middle Initial)

## **C. Internal Revenue Service**

Mailing Address Main Street

City Hartford State CT Zip Code 06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4728

Date of Disbursement

08 / 10 / 2006

Amount of Each Disbursement this Period

5738.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

29565.79

**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  
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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Internal Revenue Service**

Mailing Address Main Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4921

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

7831.46

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

Full Name (Last, First, Middle Initial)

## **B. Jamestown Associates**

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA/TV

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4556

Date of Disbursement

07 / 10 / 2006

Amount of Each Disbursement this Period

27883.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA/TV

Full Name (Last, First, Middle Initial)

## **C. Jamestown Associates**

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA/TV

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4622

Date of Disbursement

07 / 19 / 2006

Amount of Each Disbursement this Period

128887.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA/TV

**SUBTOTAL** of Disbursements This Page (optional) .....

164601.46

**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  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA/TV

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4707

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA/TV

Full Name (Last, First, Middle Initial)

**B.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4958

Date of Disbursement

/   /

Amount of Each Disbursement this Period

179080.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**C.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4959

Date of Disbursement

/   /

Amount of Each Disbursement this Period

849975.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

**SUBTOTAL** of Disbursements This Page (optional) .....

1088355.40

**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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA/TV

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4780

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59064.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA/TV

Full Name (Last, First, Middle Initial)

**B.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA CONSULTING FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4805

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA CONSULTING FEE

Full Name (Last, First, Middle Initial)

**C.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
CABLE BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19154.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CABLE BUY

**SUBTOTAL** of Disbursements This Page (optional) .....

88218.95

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74795.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**B.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4900

Date of Disbursement

/   /

Amount of Each Disbursement this Period

123810.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**C.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City  
Princeton

State  
NJ

Zip Code  
08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4914

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50175.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

**SUBTOTAL** of Disbursements This Page (optional) .....

248780.40

**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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton State NJ Zip Code 08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4945

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5708.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**B.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton State NJ Zip Code 08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4944

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120325.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

Full Name (Last, First, Middle Initial)

**C.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton State NJ Zip Code 08540-

Purpose of Disbursement  
MEDIA BUY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61006.E4966

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

MEDIA BUY

**SUBTOTAL** of Disbursements This Page (optional) .....

276633.21

**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)

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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Judge John Carter For Congress

Mailing Address PO Box 6930

City  
Round RockState  
TXZip Code  
78683-Purpose of Disbursement  
FUNDRAISER LETTER

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60725.C34914IK

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	1	/	2	0	0	6

Amount of Each Disbursement this Period

48.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: FUNDRAISER LETTER

Full Name (Last, First, Middle Initial)

**B.** Mr. Matthew Kaliski

Mailing Address 60 Sbona Road

City  
KensingtonState  
CTZip Code  
06037-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4804

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	4	/	2	0	0	6

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Kanes Market

Mailing Address 1310 Hopmeadow Street

City  
SimsburyState  
CTZip Code  
06070-Purpose of Disbursement  
CATERING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4435

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	3	/	2	0	0	6

Amount of Each Disbursement this Period

2995.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

SUBTOTAL of Disbursements This Page (optional) .....

3343.50

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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Lacaria

Mailing Address 191 Pondview Drive

City  
Watertown

State  
CT

Zip Code  
06795-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4578

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** MCI

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1527.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** MCI

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4613

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1123.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

3573.84

**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 Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** MCI

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4757

Date of Disbursement

/   /

Amount of Each Disbursement this Period

624.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** MCI

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4955

Date of Disbursement

/   /

Amount of Each Disbursement this Period

306.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** Meals from the Heart

Mailing Address 102 Virginia Avenue

City  
Rockville

State  
MD

Zip Code  
20850-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4560

Date of Disbursement

/   /

Amount of Each Disbursement this Period

846.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

1778.07

**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 Page

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Kendra Mehring

Mailing Address 17 Laurel Crest Drive

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1909.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Kendra Mehring

Mailing Address 17 Laurel Crest Drive

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4785

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1909.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Kendra Mehring

Mailing Address 17 Laurel Crest Drive

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4942

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1374.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

5192.94

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4587

Date of Disbursement

/   /

Amount of Each Disbursement this Period

685.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4740

Date of Disbursement

/   /

Amount of Each Disbursement this Period

685.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4934

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2485.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

3856.97

**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 333 / 414

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4447

Date of Disbursement

07 / 05 / 2006

Amount of Each Disbursement this Period

17117.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**B.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4716

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

5336.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**C.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4839

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

6933.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

29388.08

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Moving Picture Videos**

Mailing Address 2450 Main Street

City Glastonbury State CT Zip Code 06033-

Purpose of Disbursement  
CONVERT VIDEO TO WINDOWS MEDIA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4719

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONVERT VIDEO TO WINDOWS  
MEDIA

Full Name (Last, First, Middle Initial)

## **B. Moving Picture Videos**

Mailing Address 2450 Main Street

City Glastonbury State CT Zip Code 06033-

Purpose of Disbursement  
CONVERT VHS TO DVD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4902

Date of Disbursement

09 / 11 / 2006

Amount of Each Disbursement this Period

93.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONVERT VHS TO DVD

Full Name (Last, First, Middle Initial)

## **C. NAACP Freedom Fund**

Mailing Address PO Box 1012

City Hartford State CT Zip Code 06143-

Purpose of Disbursement  
AD BOOK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4752

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

75.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AD BOOK

**SUBTOTAL** of Disbursements This Page (optional) .....

343.50

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. New Britain Chamber of Co**

Mailing Address One Court Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
AD BOOK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4616

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

AD BOOK

Full Name (Last, First, Middle Initial)

## **B. Margaret Nowicki**

Mailing Address 77 Commonwealth Ave.

City Newington State CT Zip Code 06111-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4577

Date of Disbursement

/   /

Amount of Each Disbursement this Period

461.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

## **C. Margaret Nowicki**

Mailing Address 77 Commonwealth Ave.

City Newington State CT Zip Code 06111-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4650

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

576.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Margaret Nowicki

Mailing Address 77 Commonwealth Ave.

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60927.E4781

Date of Disbursement

/   /

Amount of Each Disbursement this Period

349.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Margaret Nowicki

Mailing Address 77 Commonwealth Ave.

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4769

Date of Disbursement

/   /

Amount of Each Disbursement this Period

84.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4568

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

495.48

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4588

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1867.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4652

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1989.12

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
NewingtonState  
CTZip Code  
06111-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4800

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	3	/	2	0	0	6

Amount of Each Disbursement this Period

840.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Office Works

Mailing Address 45 Corporate Avenue

City  
PlainvilleState  
CTZip Code  
06062-Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4434

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

506.69

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COPIER RENTAL

Full Name (Last, First, Middle Initial)

**C.** Office Works

Mailing Address 45 Corporate Avenue

City  
PlainvilleState  
CTZip Code  
06062-Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4664

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	3	1	/	2	0	0	6

Amount of Each Disbursement this Period

598.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COPIER RENTAL

SUBTOTAL of Disbursements This Page (optional) .....

1945.49

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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Office Works**

Mailing Address 45 Corporate Avenue

City Plainville State CT Zip Code 06062-

Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4838

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

617.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COPIER RENTAL

Full Name (Last, First, Middle Initial)

## **B. Mr. David Ogan**

Mailing Address 19 Fox Run Road

City Unionville State CT Zip Code 06085-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4943

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

1324.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

## **C. Mr. David Ogan**

Mailing Address 19 Fox Run Road

City Unionville State CT Zip Code 06085-

Purpose of Disbursement  
REIMBURSE EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4984

Date of Disbursement

09 / 25 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE EXPENSES

**SUBTOTAL** of Disbursements This Page (optional) .....

2442.32

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Eric Ogan

Mailing Address 19 Fox Run Road

City  
Unionville

State  
CT

Zip Code  
06085-

Purpose of Disbursement  
REIMBURSE MILEAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4908

Date of Disbursement

/   /

Amount of Each Disbursement this Period

86.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE MILEAGE

Full Name (Last, First, Middle Initial)

**B.** Mr. Eric Ogan

Mailing Address 19 Fox Run Road

City  
Unionville

State  
CT

Zip Code  
06085-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4927

Date of Disbursement

/   /

Amount of Each Disbursement this Period

92.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. Eric Ogan

Mailing Address 19 Fox Run Road

City  
Unionville

State  
CT

Zip Code  
06085-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61006.E4982

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

307.77

**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  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

114.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4570

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4581

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1092.35

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4708

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4782

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4789

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1048.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4815

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE MILEAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4907

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE MILEAGE

Full Name (Last, First, Middle Initial)

**C.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
REIMBURSE MILEAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

56.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE MILEAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

179.90

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Brent Perrin

Mailing Address 31 Grant Drive

City  
Avon

State  
CT

Zip Code  
06001-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4937

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1477.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Petty Cash

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4439

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

**C.** Petty Cash

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4552

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

**SUBTOTAL** of Disbursements This Page (optional) .....

1877.60

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4571

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**NO EXPENDITURE MORE THAN  
\$100**

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**NO EXPENDITURE MORE THAN  
\$100**

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4656

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**NO EXPENDITURE MORE THAN  
\$100**

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**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:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4713

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4712

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address 212 Main Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4771

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address 212 Main Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4787

Date of Disbursement

08 / 18 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4793

Date of Disbursement

08 / 21 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**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:  
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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Petty Cash**

Mailing Address 212 Main Street

City  
New BritainState  
CTZip Code  
06050-Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4829

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	0	6

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

**B. Petty Cash**

Mailing Address 212 Main Street

City  
New BritainState  
CTZip Code  
06050-Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4896

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	0	6

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

**C. Petty Cash**

Mailing Address 212 Main Street

City  
New BritainState  
CTZip Code  
06050-Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4911

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	2		2	0	0	6

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53NO EXPENDITURE MORE THAN  
\$100

SUBTOTAL of Disbursements This Page (optional) .....

600.00

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:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4965

Date of Disbursement

09 / 20 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4986

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4990

Date of Disbursement

09 / 29 / 2006

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

**SUBTOTAL** of Disbursements This Page (optional) .....

600.00

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Luke Pietrzak

Mailing Address 17 Minuteman Circle

City  
Southbury

State  
CT

Zip Code  
06488-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60710.E4399

Date of Disbursement

/   /

Amount of Each Disbursement this Period

131.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Luke Pietrzak

Mailing Address 17 Minuteman Circle

City  
Southbury

State  
CT

Zip Code  
06488-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4598

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Luke Pietrzak

Mailing Address 17 Minuteman Circle

City  
Southbury

State  
CT

Zip Code  
06488-

Purpose of Disbursement  
PAYROILL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4742

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROILL

**SUBTOTAL** of Disbursements This Page (optional) .....

1978.40

**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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Luke Pietrzak

Mailing Address 17 Minuteman Circle

City  
Southbury

State  
CT

Zip Code  
06488-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4803

Date of Disbursement

/   /

Amount of Each Disbursement this Period

230.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Luke Pietrzak

Mailing Address 17 Minuteman Circle

City  
Southbury

State  
CT

Zip Code  
06488-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

228.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Potomac Design

Mailing Address 4917 N 35th Street

City  
Arlington

State  
VA

Zip Code  
22207-

Purpose of Disbursement  
WEBSITE MAINTENANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4663

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WEBSITE MAINTENANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

3059.85

**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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER & MAINTENANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60803.E4440

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2336.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER & MAINTENANCE

Full Name (Last, First, Middle Initial)

## **B. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER MAINTENANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60830.E4717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

111.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER MAINTENANCE

Full Name (Last, First, Middle Initial)

## **C. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER MAINTENANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60927.E4807

Date of Disbursement

/   /

Amount of Each Disbursement this Period

287.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER MAINTENANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

2734.35

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. RBS**

Mailing Address P. O. Box 42010

City  
ProvidenceState  
RIZip Code  
02940-2010Purpose of Disbursement  
ANNUAL MEMBERSHIP FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60803.E4452**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	0	6

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**ANNUAL MEMBERSHIP FEE**

Full Name (Last, First, Middle Initial)

**B. RBS**

Mailing Address P. O. Box 42010

City  
ProvidenceState  
RIZip Code  
02940-2010Purpose of Disbursement  
ANNUAL MEMBERSHIP FEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60803.E4453**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	0	6

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**ANNUAL MEMBERSHIP FEE**

Full Name (Last, First, Middle Initial)

**C. RBS**

Mailing Address P. O. Box 42010

City  
ProvidenceState  
RIZip Code  
02940-2010Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60803.E4454**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	6		2	0	0	6

Amount of Each Disbursement this Period

16975.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**SEE BELOW****SUBTOTAL** of Disbursements This Page (optional) .....**17025.65****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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2675.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

**B.** Angelos Market Inc.

Mailing Address 683 Osgood Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4698

Date of Disbursement

/   /

Amount of Each Disbursement this Period

38.37

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

**C.** Boston Market

Mailing Address 44 Fenn Road

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4689

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

2675.04

**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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A.** Chilis Restaurant

Mailing Address 70 South St.

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4702

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

## **B.** Chilis Restaurant

Mailing Address 70 South St.

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4693

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

## **C.** Chilis Restaurant

Mailing Address 70 South St.

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4686

Date of Disbursement

/   /

Amount of Each Disbursement this Period

66.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

**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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Puerto Vallarta Restaurant**

Mailing Address 826 Queen Street

City  
Southington

State  
CT

Zip Code  
06489-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

## **B. Staples**

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

26.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. Staples**

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4687

Date of Disbursement

/   /

Amount of Each Disbursement this Period

123.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

**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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4696

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

30.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4691

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

307.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C.** Stop & Shop

Mailing Address 1309 Corbin Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4701

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

35.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Stop & Shop**

Mailing Address 1309 Corbin Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4684

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Target**

Mailing Address 954 Farmington Avenue

City  
Kensington

State  
CT

Zip Code  
06037-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. Target**

Mailing Address 954 Farmington Avenue

City  
Kensington

State  
CT

Zip Code  
06037-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4685

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. U.S. Postal Service**

Mailing Address Chestnut Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4688

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1521.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Walmart**

Mailing Address Slater Road

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. RBS**

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4666

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1041.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

1041.94

**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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. M&R Liquors**

Mailing Address 214 W. Main St.

City Avon State CT Zip Code 06001-

Purpose of Disbursement  
EVENT EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4668

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

379.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: EVENT EXPENSE

Full Name (Last, First, Middle Initial)

## **B. Staples**

Mailing Address 3174 Berlin Turnpike

City Newington State CT Zip Code 06111-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4667

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

371.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. AOL Service**

Mailing Address TWX\*AOL Service

City Ashburn State VA Zip Code 20147-

Purpose of Disbursement  
INTERNET SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4672

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

25.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: INTERNET SERVICE

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Topica, Inc.

Mailing Address 620 Folsom Street, #3

City  
San Francisco

State  
CA

Zip Code  
94107-

Purpose of Disbursement  
CAMPAIGN EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4671

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CAMPAIGN EXPENSE

Full Name (Last, First, Middle Initial)

**B.** VWH

Mailing Address unknown

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
WEB HOSTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4673

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: WEB HOSTING

Full Name (Last, First, Middle Initial)

**C.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4674

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1016.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

1016.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Cape Air

Mailing Address 110 Mary Dunn Way

City Hyannis State MA Zip Code 02601-

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4679

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

165.06

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**B.** Cape Air

Mailing Address 110 Mary Dunn Way

City Hyannis State MA Zip Code 02601-

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4680

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

165.06

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**C.** Cape Air

Mailing Address 110 Mary Dunn Way

City Hyannis State MA Zip Code 02601-

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4678

Date of Disbursement

07 / 31 / 2006

Amount of Each Disbursement this Period

141.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

**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:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Cape Air

Mailing Address 110 Mary Dunn Way

City Hyannis	State MA	Zip Code 02601-
-----------------	-------------	--------------------

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

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: 60830.E4677

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

141.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**B.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton	State NJ	Zip Code 08540-
-------------------	-------------	--------------------

Purpose of Disbursement  
MEDIA

Candidate Name

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: 60830.E4676

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

250.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

MEMO: MEDIA

Full Name (Last, First, Middle Initial)

**C.** Jamestown Associates

Mailing Address 5 Mapleton Avenue

City Princeton	State NJ	Zip Code 08540-
-------------------	-------------	--------------------

Purpose of Disbursement  
MEDIA

Candidate Name

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: 60830.E4682

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	1		2	0	0	6

Amount of Each Disbursement this Period

87.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

MEMO: MEDIA

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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4675

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: PRINTING

Full Name (Last, First, Middle Initial)

**B.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2375.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

**C.** Best Buy

Mailing Address 10801 Red Circle Drive

City  
Hopkins

State  
MN

Zip Code  
55343-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4878

Date of Disbursement

/   /

Amount of Each Disbursement this Period

341.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

2375.22

**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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Best Buy**

Mailing Address 10801 Red Circle Drive

City Hopkins State MN Zip Code 55343-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4880

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

127.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Best Buy**

Mailing Address 10801 Red Circle Drive

City Hopkins State MN Zip Code 55343-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4879

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

805.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. CT Beverage Mart**

Mailing Address 615 Hartford Road

City New Britain State CT Zip Code 06053-

Purpose of Disbursement  
EVENT EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4889

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

226.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: EVENT EXPENSE

**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  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Chilis Restaurant**

Mailing Address 70 South St.

City  
New BritainState  
CTZip Code  
06051-Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4877

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

51.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: FOOD &amp; BEVERAGE

**B. Cingular Wireless**

Mailing Address P.O. Box 8177

City  
New HavenState  
CTZip Code  
06530-Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4884

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

119.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: TELEPHONE

**C. Great Taste Chinese Restaurant**

Mailing Address 597 W. Main Street

City  
New BritainState  
CTZip Code  
06053-Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4882

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

126.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: FOOD &amp; BEVERAGE

**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  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Great Taste Chinese Restaurant**

Mailing Address 597 W. Main Street

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4875

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

50.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

## **B. Staples**

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4883

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

84.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. Topica, Inc.**

Mailing Address 620 Folsom Street, #3

City  
San Francisco

State  
CA

Zip Code  
94107-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4876

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

142.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
TucsonState  
AZZip Code  
85731-7120Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4881

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

105.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: TELEPHONE

**B. RBS**

Full Name (Last, First, Middle Initial)

Mailing Address P. O. Box 42010

City  
ProvidenceState  
RIZip Code  
02940-2010Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4870

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

108.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**C. AOL Service**

Full Name (Last, First, Middle Initial)

Mailing Address TWX\*AOL Service

City  
AshburnState  
VAZip Code  
20147-Purpose of Disbursement  
INTERNET SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4872

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

25.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: INTERNET SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

108.35

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Topica, Inc.

Mailing Address 620 Folsom Street, #3

City  
San Francisco

State  
CA

Zip Code  
94107-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4840

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3875.37

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

**C.** Angelos Market Inc.

Mailing Address 683 Osgood Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4849

Date of Disbursement

/   /

Amount of Each Disbursement this Period

45.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

3875.37

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Best Buy**

Mailing Address 10801 Red Circle Drive

City Hopkins State MN Zip Code 55343-

Purpose of Disbursement  
REFUND ON SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4841

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

-105.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: REFUND ON SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Best Buy**

Mailing Address 10801 Red Circle Drive

City Hopkins State MN Zip Code 55343-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4862

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

127.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **C. Marriott Hotel**

Mailing Address 63 Grand Street

City Bridgeport State CT Zip Code 06107-

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4861

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL

**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)

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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 3174 Berlin Turnpike

City  
NewingtonState  
CTZip Code  
06111-Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4859

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

127.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 3174 Berlin Turnpike

City  
NewingtonState  
CTZip Code  
06111-Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4863

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

207.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 3174 Berlin Turnpike

City  
NewingtonState  
CTZip Code  
06111-Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4851

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

513.96

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: SUPPLIES

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:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4850

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4866

Date of Disbursement

/   /

Amount of Each Disbursement this Period

91.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

119.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

234.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4867

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 3174 Berlin Turnpike

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4844

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**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  
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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Staples**

Mailing Address 3174 Berlin Turnpike

City  
NewingtonState  
CTZip Code  
06111-Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4868

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

91.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B. U.S. Postal Service**

Mailing Address Chestnut Street

City  
New BritainState  
CTZip Code  
06050-Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4860

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

1305.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: POSTAGE

Full Name (Last, First, Middle Initial)

**C. Walmart**

Mailing Address Slater Road

City  
New BritainState  
CTZip Code  
06053-Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4858

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	6		2	0	0	6

Amount of Each Disbursement this Period

69.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: SUPPLIES

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)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Walmart

Mailing Address Slater Road

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

99.16

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Rich & Delicious

Mailing Address 485 Squire Hill Road

City  
Cheshire

State  
CT

Zip Code  
06410-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

**C.** Rich & Delicious

Mailing Address 485 Squire Hill Road

City  
Cheshire

State  
CT

Zip Code  
06410-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

355.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

505.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New Haven

State  
CT

Zip Code  
06508-0901

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4425

Date of Disbursement

/   /

Amount of Each Disbursement this Period

874.76

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New Haven

State  
CT

Zip Code  
06508-0901

Purpose of Disbursement  
AUDIO CONFERENCING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AUDIO CONFERENCING

Full Name (Last, First, Middle Initial)

**C.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New Haven

State  
CT

Zip Code  
06508-0901

Purpose of Disbursement  
8 ADDITIONAL LINES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4553

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2400.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

8 ADDITIONAL LINES

**SUBTOTAL** of Disbursements This Page (optional) .....

3296.76

**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:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** SBC/AT&T

Mailing Address P.O. Box 1861

City State Zip Code  
New Haven CT 06508-0901

Purpose of Disbursement  
PHONE SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

531.37

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICES

Full Name (Last, First, Middle Initial)

**B.** SBC/AT&T

Mailing Address P.O. Box 1861

City State Zip Code  
New Haven CT 06508-0901

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4758

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1982.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** SBC/AT&T

Mailing Address P.O. Box 1861

City State Zip Code  
New Haven CT 06508-0901

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4904

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2400.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

4913.94

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New HavenState  
CTZip Code  
06508-0901Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4920

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

1262.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New HavenState  
CTZip Code  
06508-0901Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4919

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

588.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** SBC/AT&T

Mailing Address P.O. Box 1861

City  
New HavenState  
CTZip Code  
06508-0901Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4918

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	4		2	0	0	6

Amount of Each Disbursement this Period

196.83

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

2047.68

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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Brian Schubert

Mailing Address 1515 State Street

City  
New HavenState  
CTZip Code  
06511-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4786

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	5	/	2	0	0	6

Amount of Each Disbursement this Period

3274.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Secretary of the State

Mailing Address 30 Trinity Street

City  
HartfordState  
CTZip Code  
06106-Purpose of Disbursement  
VOTER DATABASE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4410

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

VOTER DATABASE

Full Name (Last, First, Middle Initial)

**C.** Brian Shubert

Mailing Address 2218 38th St., NW

City  
WashingtonState  
DCZip Code  
20007-Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4706

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

150.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

SUBTOTAL of Disbursements This Page (optional) .....

3724.95

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 Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Brian Shubert

Mailing Address 2218 38th St., NW

City  
Washington

State  
DC

Zip Code  
20007-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3274.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Brian Shubert

Mailing Address 2218 38th St., NW

City  
Washington

State  
DC

Zip Code  
20007-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

230.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4417

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3195.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**SUBTOTAL** of Disbursements This Page (optional) .....

6701.22

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1631.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

**B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4624

Date of Disbursement

/   /

Amount of Each Disbursement this Period

156.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4632

Date of Disbursement

/   /

Amount of Each Disbursement this Period

398.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**SUBTOTAL** of Disbursements This Page (optional) .....

2186.50

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4642

Date of Disbursement

/   /

Amount of Each Disbursement this Period

377.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INVITATIONS

Full Name (Last, First, Middle Initial)

**B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4651

Date of Disbursement

/   /

Amount of Each Disbursement this Period

209.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INVITATIONS

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
ENVELOPES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1372.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ENVELOPES

**SUBTOTAL** of Disbursements This Page (optional) .....

1959.98

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New BritainState  
CTZip Code  
06051-Purpose of Disbursement  
INVITATIONS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4753

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

Amount of Each Disbursement this Period

178.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INVITATIONS

Full Name (Last, First, Middle Initial)

**B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New BritainState  
CTZip Code  
06051-Purpose of Disbursement  
PRESS KIT TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4754

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

Amount of Each Disbursement this Period

502.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRESS KIT TAXES

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New BritainState  
CTZip Code  
06051-Purpose of Disbursement  
PRESS KIT TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4794

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	2		2	0	0	6

Amount of Each Disbursement this Period

195.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRESS KIT TAXES

SUBTOTAL of Disbursements This Page (optional) .....

876.72

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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

995.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

Full Name (Last, First, Middle Initial)

**B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4837

Date of Disbursement

/   /

Amount of Each Disbursement this Period

472.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4903

Date of Disbursement

/   /

Amount of Each Disbursement this Period

434.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

**SUBTOTAL** of Disbursements This Page (optional) .....

1901.67

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Sir Speedy Printing**

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4953

Date of Disbursement

/   /

Amount of Each Disbursement this Period

452.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

## **B. Sir Speedy Printing**

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 61006.E4970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

151.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

## **C. Matthew Skoryk**

Mailing Address 77 Wildcat Road

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4576

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1527.42

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Matthew Skoryk**

Mailing Address 77 Wildcat Road

City  
BurlingtonState  
CTZip Code  
06013-Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60830.E4723**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	4		2	0	0	6

Amount of Each Disbursement this Period

148.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B. Matthew Skoryk**

Mailing Address 77 Wildcat Road

City  
BurlingtonState  
CTZip Code  
06013-Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60830.E4734**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C. Matthew Skoryk**

Mailing Address 77 Wildcat Road

City  
BurlingtonState  
CTZip Code  
06013-Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60830.E4767**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

Amount of Each Disbursement this Period

197.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1269.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Matthew Skoryk

Mailing Address 77 Wildcat Road

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4917

Date of Disbursement

/   /

Amount of Each Disbursement this Period

221.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Matthew Skoryk

Mailing Address 77 Wildcat Road

City  
Burlington

State  
CT

Zip Code  
06013-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4933

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1477.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** St. Paul Travelers Remittance Cent

Mailing Address One Tower Square  
4 Main North

City  
Hartford

State  
CT

Zip Code  
06183-

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4773

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2720.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INSURANCE

**SUBTOTAL** of Disbursements This Page (optional) .....

4419.11

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** St. Paul Travelers Remittance CentMailing Address One Tower Square  
4 Main North

City Hartford State CT Zip Code 06183-

Purpose of Disbursement  
WORKERS COMP. INSURANCE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4759

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

Amount of Each Disbursement this Period

768.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WORKERS COMP. INSURANCE

Full Name (Last, First, Middle Initial)

**B.** St. Paul Travelers Remittance CentMailing Address One Tower Square  
4 Main North

City Hartford State CT Zip Code 06183-

Purpose of Disbursement  
INSURANCE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4954

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	6

Amount of Each Disbursement this Period

726.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

INSURANCE

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 3174 Berlin Turnpike

City Newington State CT Zip Code 06111-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4562

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	0		2	0	0	6

Amount of Each Disbursement this Period

108.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) .....

1602.02

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 PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Megan Steuer**

Mailing Address 21 Hundred Acres Road

City Newtown State CT Zip Code 06470-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4591

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	0	6

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B. Megan Steuer**

Mailing Address 21 Hundred Acres Road

City Newtown State CT Zip Code 06470-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4631

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	5		2	0	0	6

Amount of Each Disbursement this Period

54.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C. Megan Steuer**

Mailing Address 21 Hundred Acres Road

City Newtown State CT Zip Code 06470-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4710

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	6

Amount of Each Disbursement this Period

33.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

SUBTOTAL of Disbursements This Page (optional) .....

1011.22

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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4436

Date of Disbursement

/   /

Amount of Each Disbursement this Period

47.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

105.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4574

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1076.65

**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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4722

Date of Disbursement

/   /

Amount of Each Disbursement this Period

135.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4730

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4836

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1191.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4936

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE EXPENSES

Full Name (Last, First, Middle Initial)

**C.** Shannon Sullivan

Mailing Address 40 Crest Street, #19

City  
West Haven

State  
CT

Zip Code  
06516-

Purpose of Disbursement  
REIMBURSE FOR SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

98.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE FOR SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

1222.18

**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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Shannon Sullivan

Mailing Address 40 Crest Street, #19

City  
West Haven

State  
CT

Zip Code  
06516-

Purpose of Disbursement  
REIMBURSE SUPPLIES FROM SAMS CLUB

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4721

Date of Disbursement

/   /

Amount of Each Disbursement this Period

147.77

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE SUPPLIES FROM  
SAMS CLUB

Full Name (Last, First, Middle Initial)

**B.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4573

Date of Disbursement

/   /

Amount of Each Disbursement this Period

923.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4659

Date of Disbursement

/   /

Amount of Each Disbursement this Period

201.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1272.66

**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  
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FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4768

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4731

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1123.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60927.E4796

Date of Disbursement

/   /

Amount of Each Disbursement this Period

127.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

1310.98

**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

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(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4834

Date of Disbursement

/   /

Amount of Each Disbursement this Period

86.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60928.E4935

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1125.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE - EVENT EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

176.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - EVENT EXPENSES

**SUBTOTAL** of Disbursements This Page (optional) .....

1387.86

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4586

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1788.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4611

Date of Disbursement

/   /

Amount of Each Disbursement this Period

87.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

2125.68

**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:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4709

Date of Disbursement

/   /

Amount of Each Disbursement this Period

171.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2038.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60830.E4770

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE FOOD & BEVERAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

2262.42

**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:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60928.E4940

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2038.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Terrapin Studios

Mailing Address 652 Glenbrook Road

City  
Stamford

State  
CT

Zip Code  
06906-

Purpose of Disbursement  
PHOTOGRAPHY SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60803.E4565

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1144.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHOTOGRAPHY SERVICES

Full Name (Last, First, Middle Initial)

**C.** Terrapin Studios

Mailing Address 652 Glenbrook Road

City  
Stamford

State  
CT

Zip Code  
06906-

Purpose of Disbursement  
PHOTOGRAPHY AT EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60927.E4798

Date of Disbursement

/   /

Amount of Each Disbursement this Period

747.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHOTOGRAPHY AT EVENT

**SUBTOTAL** of Disbursements This Page (optional) .....

3930.28

**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  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. The Waterbury Club**

Mailing Address 30 Holmes Avenue

City  
Waterbury

State  
CT

Zip Code  
06710-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

## **B. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
E-MAIL COMMUNICATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.C35010IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: E-MAIL COMMUNICA-  
TION

Full Name (Last, First, Middle Initial)

## **C. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
E-MAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.C35280IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: E-MAIL

**SUBTOTAL** of Disbursements This Page (optional) .....

663.27

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.C35114IK

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

554.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: PRINTING

Full Name (Last, First, Middle Initial)

## **B. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
E-MAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.C35116IK

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

273.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: E-MAIL

Full Name (Last, First, Middle Initial)

## **C. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
POSTGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.C35115IK

Date of Disbursement

08 / 08 / 2006

Amount of Each Disbursement this Period

214.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: POSTGE

**SUBTOTAL** of Disbursements This Page (optional) .....

1041.54

**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  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
E-MAILS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.C35361IK

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

74.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: E-MAILS

Full Name (Last, First, Middle Initial)

## **B. The Wish List PAC**

Mailing Address Ms. Pat Carpenter  
333 North Fairfax St., Ste. 302

City Alexandria State VA Zip Code 22314-

Purpose of Disbursement  
E-MAILS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.C35533IK

Date of Disbursement

09 / 05 / 2006

Amount of Each Disbursement this Period

67.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: E-MAILS

Full Name (Last, First, Middle Initial)

## **C. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4612

Date of Disbursement

07 / 18 / 2006

Amount of Each Disbursement this Period

1560.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

1701.90

**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:  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4727

Date of Disbursement

08 / 09 / 2006

Amount of Each Disbursement this Period

149.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4749

Date of Disbursement

08 / 11 / 2006

Amount of Each Disbursement this Period

780.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **C. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4811

Date of Disbursement

08 / 28 / 2006

Amount of Each Disbursement this Period

1950.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

2880.40

**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  
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(check only one)

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<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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4912

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	6

Amount of Each Disbursement this Period

1950.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**B. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4987

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	7		2	0	0	6

Amount of Each Disbursement this Period

195.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P.O. Box 17120

City Tucson State AZ Zip Code 85731-7120

Purpose of Disbursement  
CELL PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4424

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	6

Amount of Each Disbursement this Period

607.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

2752.62

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
CELL PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4638

Date of Disbursement

/   /

Amount of Each Disbursement this Period

380.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE SERVICE

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
CELL PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4806

Date of Disbursement

/   /

Amount of Each Disbursement this Period

455.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CELL PHONE SERVICE

Full Name (Last, First, Middle Initial)

## **C. Webster Bank**

Mailing Address 435 South Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
STOP PYMT FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60830.E4774

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

STOP PYMT FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

855.18

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Webster Bank**

Mailing Address 435 South Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
WIRE FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60928.E4960

Date of Disbursement

08 / 04 / 2006

Amount of Each Disbursement this Period

16.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WIRE FEE

Full Name (Last, First, Middle Initial)

## **B. Webster Bank**

Mailing Address 435 South Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
WIRE FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60928.E4961

Date of Disbursement

08 / 15 / 2006

Amount of Each Disbursement this Period

16.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WIRE FEE

Full Name (Last, First, Middle Initial)

## **C. Mr. Christopher Zavagnin**

Mailing Address 41 Turkey Hollow Lane

City Goshen State CT Zip Code 06756-

Purpose of Disbursement  
REIMBURSE OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60803.E4421

Date of Disbursement

07 / 01 / 2006

Amount of Each Disbursement this Period

42.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

74.39

**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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Christopher Zavagnin

Mailing Address 41 Turkey Hollow Lane

City  
Goshen

State  
CT

Zip Code  
06756-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4583

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1617.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mr. Christopher Zavagnin

Mailing Address 41 Turkey Hollow Lane

City  
Goshen

State  
CT

Zip Code  
06756-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4599

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. Christopher Zavagnin

Mailing Address 41 Turkey Hollow Lane

City  
Goshen

State  
CT

Zip Code  
06756-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60830.E4738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1867.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

3734.78

**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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Christopher Zavagnin

Mailing Address 41 Turkey Hollow Lane

City  
Goshen

State  
CT

Zip Code  
06756-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60928.E4939

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1867.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1867.00

**TOTAL** This Period (last page this line number only) .....

2356171.44

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** National Republican Congressional Commit

Mailing Address 320 First Street SE

City  
Washington

State  
DC

Zip Code  
20003-

Purpose of Disbursement  
EXCESS FUNDS CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60803.E4630

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	6

Amount of Each Disbursement this Period

50000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

50000.00

**TOTAL** This Period (last page this line number only) .....

50000.00



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. American Ambulance Assn. Federal PAC**

Mailing Address Government Affairs Director  
8201 Greensboro Drive, Suite 300

City McLean State VA Zip Code 22102-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5018

Date of Disbursement

09 / 30 / 2006

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. Continuing A Majority PAC**

Mailing Address Government Affairs Director  
5915 Eastman Ave., Ste. 100

City Midland State MI Zip Code 48640-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5048

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Cablevision Systems Corporation PAC**

Mailing Address 1111 Stewart Avenue

City Bethpage State NY Zip Code 11714-

Purpose of Disbursement  
Refund of Contribution refund contributi

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4818

Date of Disbursement

08 / 29 / 2006

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

7500.00

**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)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. Ernst & Young PAC**Mailing Address Ms. K.C. Tominovich  
1225 Connecticut Ave, NW, Ste 600

City Washington State DC Zip Code 20036-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4988

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 0 6

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. Florida Republican Leadership PAC**Mailing Address Government Affairs Director  
1316 Lake Victoria Dr.

City Lake Worth State FL Zip Code 33461-

Purpose of Disbursement  
Refund of Contribution refund 2006 Prima

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4994

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 2 9 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Natl Beer Wholesalers Assn PAC**Mailing Address Mr. David Rehr  
1101 King Street, Ste 600

City Alexandria State VA Zip Code 22314-2944

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5046

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

5500.00

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)

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Nixon Peabody LLP Federal PAC**

Mailing Address Mr. Stephen Wallace  
401 9th Street, NW, Sute 900

City Washington State DC Zip Code 20004-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5052

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Amer Acad of Dermatology PAC**

Mailing Address Mr. Robb Bohannon  
1350 I Street, NW, Suite 880

City Washington State DC Zip Code 20005-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5047

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Sunshine PAC**

Mailing Address The Honorable Clay Shaw  
133 East Indiana Ave.

City Deland State FL Zip Code 32724-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5049

Date of Disbursement

09 / 30 / 2006

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

6500.00

**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 412 / 414

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☐ 20a ☐ 20b ☒ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Teaching Hospital Education PAC**

Mailing Address Mr. William Signer  
805 15th Street, NW, Ste 500

City Washington State DC Zip Code 20005-2207

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4819

Date of Disbursement

08 / 29 / 2006

Amount of Each Disbursement this Period

2500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Wally Herger for Congress Committee**

Mailing Address PO Box 1500

City Chico State CA Zip Code 95927-

Purpose of Disbursement  
Refund of Contribution refund excess con

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61009.E5050

Date of Disbursement

09 / 30 / 2006

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)

## **C. Webster Bank Pac-State**

Mailing Address 145 Bank Street

City Waterbury State CT Zip Code 06702-

Purpose of Disbursement  
Refund of Contribution refund contributi

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
 Disbursement For: 2006 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60803.E4597

Date of Disbursement

07 / 14 / 2006

Amount of Each Disbursement this Period

5000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

9500.00

**TOTAL** This Period (last page this line number only) .....

29000.00

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input 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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jonathan Dawson

Mailing Address 6 Shorehaven Road

City  
NorwalkState  
CTZip Code  
06855-

Purpose of Disbursement

Refund of Contribution refund excess con

Candidate Name

☐ 010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4998

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	6

Amount of Each Disbursement this Period

1100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Robert Lundeen

Mailing Address P.O. Box 223

City  
Deer HarborState  
WAZip Code  
98243-

Purpose of Disbursement

Refund of Contribution refund excess con

Candidate Name

☐ 010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60927.E4820

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	6

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Leo Van Munching

Mailing Address 800 Hollow Tree Ridge Road

City  
DarienState  
CTZip Code  
06820-

Purpose of Disbursement

Refund of Contribution refund excess con

Candidate Name

☐ 010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 61006.E4997

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	6

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) .....

2400.00

TOTAL This Period (last page this line number only) .....

2400.00

Form/Schedule:**F3A**      This amendment is being submitted to show reduction in disbursements - checks voided  
Transaction ID: **C00145607**