

**FEC
FORM 3**

**AMENDED
REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
FEB 1 2008
Office Use Only

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

Friends of Bernie Sanders

ADDRESS (number and street)

P.O. Box 391

☒ Check if different than previously reported. (ACC)

Burlington

VT

05402

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00411330

3. IS THIS REPORT

☐ NEW (N)

OR

☒ AMENDED (A)

VT

00

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

2007

through

09

30

2007

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

Type or Print Name of Treasurer

Martha Abbott

Signature of Treasurer

Electronically Filed by Martha Abbott

Martha Abbott

Date

01

29

2008

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

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Bernie Sanders

Report Covering the Period:

From:

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

To:

M M D D Y Y Y Y
0 9 3 0 2 0 0 7

	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)).....	7330.00	45280.53
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	3093.21
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	7330.00	42187.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	41763.27	559129.25
(b) Total Offsets to Operating Expenditures (from Line 14).....	1254.57	89714.06
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	40508.70	469415.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	88312.85	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Friends of Bernie Sanders

Report Covering the Period:

From:

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

To:

M M D D Y Y Y Y
0 9 3 0 2 0 0 7

I. RECEIPTS

COLUMN A Total This Period

COLUMN B Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

0.00

8300.00

(ii) Unitemized.....

5830.00

25588.89

(iii) TOTAL of contributions
from individuals..... ▶

5830.00

33888.89

(b) Political Party Committees.....

0.00

0.00

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

1500.00

11391.64

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)
(add Lines 11(a)(iii), (b), (c), and (d))

7330.00

45280.53

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

0.00

0.00

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.).....

1254.57

89714.06

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

1182.53

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

8584.57

136177.12

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.....

41763.27

559129.25

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.....

0.00

1484.70

(b) Political Party Committees.....

0.00

1608.51

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

0.00

0.00

(d) TOTAL CONTRIBUTION REFUNDS
(add Lines 20(a), (b), and (c)).....

0.00

3093.21

21. OTHER DISBURSEMENTS.....

0.00

105.85

22. TOTAL DISBURSEMENTS
(add Lines 17, 18, 19(c), 20(d), and 21) ►

41763.27

562328.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

121491.55

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....

8584.57

25. SUBTOTAL (add Line 23 and Line 24).....

130076.12

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

41763.27

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD
(subtract Line 26 from Line 25).....

88312.85

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 33

(check only one)
☐ 11a ☐ 11b ☒ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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

NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

AFL-CIO Committee on Political Education

Mailing Address 815 Sixteenth St, NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C C00003806

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

09 / 06 / 2007

Transaction ID: C1825835

Amount of Each Receipt this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)

CWA-COPE PCC PAC

Mailing Address 501 3rd Street, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00002089

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

09 / 07 / 2007

Transaction ID: C1825833

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

Full Name (Last, First, Middle Initial)

American List Council

Mailing Address 16 W 22nd St

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

17577.31

Date of Receipt

MM / DD / YYYY
09 / 13 / 2007

Transaction ID: C1825832

Amount of Each Receipt this Period

1229.29

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

SUBTOTAL of Receipts This Page (optional) ►

1229.29

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

1229.29

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 7/33

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Barre Historical Society

Mailing Address PO Box 496

City
Barre

State
VT

Zip Code
05641

Purpose of Disbursement
Sponsorship

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D138323

Date of Disbursement

09 / 02 / 2007

Amount of Each Disbursement this Period

100.00

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

B.

Full Name (Last, First, Middle Initial)

Bennington Banner

Mailing Address 425 Main St

City
Bennington

State
VT

Zip Code
05201-2141

Purpose of Disbursement
Newspapers

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D138264

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

45.00

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

C.

Full Name (Last, First, Middle Initial)

Burlington Bagel Bakery

Mailing Address 93 Church St. Burlington VT

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D138327

Date of Disbursement

09 / 12 / 2007

Amount of Each Disbursement this Period

3454.12

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

SUBTOTAL of Disbursements This Page (optional)

3599.12

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 8 / 33

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Patti Casey

Transaction ID: D138257

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2007

Mailing Address 37 North St

City
Montpelier

State
VT

Zip Code
05602-2457

Amount of Each Disbursement this Period

300.00

Purpose of Disbursement
Entertainment

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

CCTA

Transaction ID: D138234

Date of Disbursement

MM / DD / YYYY
07 / 05 / 2007

Mailing Address 12 Industrial Parkway Burlington

City
Burlington

State
VT

Zip Code
05401

Amount of Each Disbursement this Period

5250.00

Purpose of Disbursement
Bus Advertising

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Transaction ID: D138319

Date of Disbursement

MM / DD / YYYY
08 / 31 / 2007

Mailing Address 2 Bank Street

City
Burlington

State
VT

Zip Code
05401

Amount of Each Disbursement this Period

5.95

Purpose of Disbursement
Bank Service Charges

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5555.95

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)
 Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
 Chittenden Bank

Transaction ID: D138320
 Date of Disbursement

Mailing Address 2 Bank Street

08 / 31 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Credit card charges

102.99

Candidate Name

Category/
Type

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

Office Sought: ☐ House ☐ Senate ☐ President
 State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
 Chittenden Bank

Transaction ID: D138321
 Date of Disbursement

Mailing Address 2 Bank Street

08 / 31 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Credit card charges

35.00

Candidate Name

Category/
Type

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

Office Sought: ☐ House ☐ Senate ☐ President
 State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
 Chittenden Bank

Transaction ID: D138322
 Date of Disbursement

Mailing Address 2 Bank Street

08 / 31 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Office Exp. (Gen. Camp. Exp.)

167.95

Candidate Name

Category/
Type

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

Office Sought: ☐ House ☐ Senate ☐ President
 State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

305.94

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Mailing Address 2 Bank Street

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138291

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

5.95

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

B.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Mailing Address 2 Bank Street

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138292

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

102.99

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

C.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Mailing Address 2 Bank Street

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138293

Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

35.00

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

SUBTOTAL of Disbursements This Page (optional)

143.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 33

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Transaction ID: D138343

Date of Disbursement

09 / 30 / 2007

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

5.95

Purpose of Disbursement

Bank Service Charges

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

B.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Transaction ID: D138344

Date of Disbursement

09 / 30 / 2007

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

182.71

Purpose of Disbursement

Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

C.

Full Name (Last, First, Middle Initial)

Chittenden Bank

Transaction ID: D138345

Date of Disbursement

09 / 30 / 2007

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

35.00

Purpose of Disbursement

Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

SUBTOTAL of Disbursements This Page (optional)

223.66

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
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 33

☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Crystal Rock Bottled Water

Transaction ID: D138329

Date of Disbursement

09 / 19 / 2007

Mailing Address 1050 Buckingham St.

City Watertown State CT Zip Code 06795

Amount of Each Disbursement this Period

26.05

Purpose of Disbursement
Meals for Volunteers

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Crystal Rock Bottled Water

Transaction ID: D138241

Date of Disbursement

07 / 05 / 2007

Mailing Address 1050 Buckingham St.

City Watertown State CT Zip Code 06795

Amount of Each Disbursement this Period

25.85

Purpose of Disbursement
Meals for Volunteers

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Democratic Conference Luncheon Fund

Transaction ID: D138263

Date of Disbursement

07 / 26 / 2007

Mailing Address

City Washington State DC Zip Code

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Business meals

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

551.90

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 33

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Democratic Senate Campaign Committee

Mailing Address

City
Washington

State
DC

Zip Code

Purpose of Disbursement
Contributions

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138341

Date of Disbursement

09 / 28 / 2007

Amount of Each Disbursement this Period

10000.00

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

B.

Full Name (Last, First, Middle Initial)

Easy Self Storage

Mailing Address 35 Swift St

City
South Burlington

State
VT

Zip Code
05403-7306

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138306

Date of Disbursement

08 / 21 / 2007

Amount of Each Disbursement this Period

87.00

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

C.

Full Name (Last, First, Middle Initial)

Easy Self Storage

Mailing Address 35 Swift St

City
South Burlington

State
VT

Zip Code
05403-7306

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138232

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

87.00

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

SUBTOTAL of Disbursements This Page (optional)

10174.00

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)
 Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
 Easy Self Storage

Transaction ID: D138266
 Date of Disbursement

Mailing Address 35 Swift St

07 / 26 / 2007

City South Burlington State VT Zip Code 05403-7306

Amount of Each Disbursement this Period

Purpose of Disbursement
 Storage

97.00

Candidate Name

Category/
 Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
 FEDEX

Transaction ID: D138267
 Date of Disbursement

Mailing Address 3875 Airways Blvd

07 / 26 / 2007

City Memphis State TN Zip Code 38116-5070

Amount of Each Disbursement this Period

Purpose of Disbursement
 Copy services

21.00

Candidate Name

Category/
 Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
 FEDEX

Transaction ID: D138271
 Date of Disbursement

Mailing Address 3875 Airways Blvd

07 / 26 / 2007

City Memphis State TN Zip Code 38116-5070

Amount of Each Disbursement this Period

Purpose of Disbursement
 Copy services

14.74

Candidate Name

Category/
 Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

132.74

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)
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
FEDEX

Transaction ID: D138231
Date of Disbursement

Mailing Address 3875 Airways Blvd

07 / 05 / 2007

City State Zip Code
Memphis TN 38116-5070

Amount of Each Disbursement this Period
14.74

Purpose of Disbursement
Copy services

Category/
Type

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

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
First Step Printing

Transaction ID: D138307
Date of Disbursement

Mailing Address PO Box 311

08 / 21 / 2007

City State Zip Code
Underhill VT 05489

Amount of Each Disbursement this Period
588.30

Purpose of Disbursement
Printing (Fundraising)

Category/
Type

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

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Government Card Services

Transaction ID: D138259
Date of Disbursement

Mailing Address

07 / 10 / 2007

City State Zip Code
Washington DC

Amount of Each Disbursement this Period
869.43

Purpose of Disbursement
Blast Fax

Category/
Type

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

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1472.47

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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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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NAME OF COMMITTEE (In Full)
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
Gus Ziesing

Transaction ID: D138326

Date of Disbursement

09 / 09 / 2007

Mailing Address 80 Austin Dr. #27

Amount of Each Disbursement this Period

1200.00

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Entertainment

Category/
Type

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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Lake Champlain Cruises

Transaction ID: D138324

Date of Disbursement

09 / 04 / 2007

Mailing Address 1 King Street

Amount of Each Disbursement this Period

2354.00

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Rental

Category/
Type

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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
NGP

Transaction ID: D138305

Date of Disbursement

08 / 21 / 2007

Mailing Address 5505 Connecticut Ave NW

Amount of Each Disbursement this Period

600.00

City Washington State DC Zip Code 20015

Purpose of Disbursement
Software

Category/
Type

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

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

4154.00

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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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) One Church Street Partnership	Transaction ID: D138330 Date of Disbursement
Mailing Address 1 Church Street	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>09 / 19 / 2007</div> </div>
City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
Purpose of Disbursement Office Rent	<div> <div>600.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Phil Fiermonte	Transaction ID: D138230 Date of Disbursement
Mailing Address 107 Lafountain St.	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>07 / 05 / 2007</div> </div>
City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
Purpose of Disbursement Internet Access	<div> <div>115.16</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sovernet	Transaction ID: D138233 Date of Disbursement
Mailing Address 276 E Allen St	<div> <div>M M / D D / Y Y Y Y Y Y</div> <div>07 / 05 / 2007</div> </div>
City Winooski State VT Zip Code 05404-1570	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div>123.04</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	
<div> <div>838.20</div> </div>	

20020052100

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)
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
Sovernet

Transaction ID: D138268

Date of Disbursement

07 / 26 / 2007

Mailing Address 276 E Allen St

Amount of Each Disbursement this Period

124.02

City Winooski State VT Zip Code 05404-1570

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Pam Sweeney

Transaction ID: D138260

Date of Disbursement

07 / 13 / 2007

Mailing Address 56 Liberty St

Amount of Each Disbursement this Period

567.04

City Montpelier State VT Zip Code 05602-2419

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Pam Sweeney

Transaction ID: D138261

Date of Disbursement

07 / 13 / 2007

Mailing Address 56 Liberty St

Amount of Each Disbursement this Period

200.00

City Montpelier State VT Zip Code 05602-2419

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

891.06

TOTAL This Period (last page this line number only)

20020052109

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)

Friends of Bernie Sanders

Full Name (Last, First, Middle Initial)

A. The Bookkeeping Center

Mailing Address 1 Mill St
Ste 140

City Burlington State VT Zip Code 05401-1533

Purpose of Disbursement
Accounting Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138229

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

705.00

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

Full Name (Last, First, Middle Initial)

B. The Mailing Center

Mailing Address 996 Rd

City East Barre State VT Zip Code 05649

Purpose of Disbursement
Printing (Field)

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138331

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

367.06

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

Full Name (Last, First, Middle Initial)

C. The Mailing Center

Mailing Address 996 Rd

City East Barre State VT Zip Code 05649

Purpose of Disbursement
Printing (Field)

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138333

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

780.06

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

SUBTOTAL of Disbursements This Page (optional) ▶

1852.12

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
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: D138262 Date of Disbursement
Mailing Address Main St	<div> <div>M M / D D / Y Y Y Y</div> <div>07 / 26 / 2007</div> </div>
City Andover State MA Zip Code 05501	Amount of Each Disbursement this Period
Purpose of Disbursement Miscellaneous (Gen. Camp. Exp.)	<div> <div>11.02</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type
B. Full Name (Last, First, Middle Initial) USPO	Transaction ID: D138332 Date of Disbursement
Mailing Address Elmwood Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>09 / 19 / 2007</div> </div>
City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
Purpose of Disbursement Postage (Gen. Camp. Exp.)	<div> <div>175.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type
C. Full Name (Last, First, Middle Initial) USPO	Transaction ID: D138298 Date of Disbursement
Mailing Address Elmwood Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>08 / 14 / 2007</div> </div>
City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
Purpose of Disbursement Postage (Gen. Camp. Exp.)	<div> <div>2418.88</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Category/ Type
SUBTOTAL of Disbursements This Page (optional)	<div>2604.90</div>
TOTAL This Period (last page this line number only)	

20020052151

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)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 17120

City
Tucson

State
AZ

Zip Code
85731-7120

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138270

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

80.81

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

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 17120

City
Tucson

State
AZ

Zip Code
85731-7120

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138334

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

125.33

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

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Mailing Address PO Box 17120

City
Tucson

State
AZ

Zip Code
85731-7120

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138335

Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

80.81

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

SUBTOTAL of Disbursements This Page (optional) ▶

286.95

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

28020052192

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)
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: D138336 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2007	
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 86.54	
City Tucson State AZ Zip Code 85731-7120	Purpose of Disbursement Mobile Phone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: D138337 Date of Disbursement M M / D D / Y Y Y Y 09 / 19 / 2007	
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 86.54	
City Tucson State AZ Zip Code 85731-7120	Purpose of Disbursement Mobile Phone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Verizon Wireless		Transaction ID: D138304 Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2007	
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 163.08	
City Tucson State AZ Zip Code 85731-7120	Purpose of Disbursement Mobile Phone Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	<input type="checkbox"/> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

336.16

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)
 Friends of Bernie Sanders

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 17120</p> <p>City Tucson State AZ Zip Code 85731-7120</p> <p>Purpose of Disbursement Mobile Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138236</p> <p>Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; text-align: center;">M M</div> <div style="display: inline-block; text-align: center;">D D</div> <div style="display: inline-block; text-align: center;">Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;">07</div> <div style="display: inline-block; text-align: center;">05</div> <div style="display: inline-block; text-align: center;">2007</div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">302.83</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 17120</p> <p>City Tucson State AZ Zip Code 85731-7120</p> <p>Purpose of Disbursement Mobile Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138237</p> <p>Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; text-align: center;">M M</div> <div style="display: inline-block; text-align: center;">D D</div> <div style="display: inline-block; text-align: center;">Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;">07</div> <div style="display: inline-block; text-align: center;">05</div> <div style="display: inline-block; text-align: center;">2007</div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">168.08</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 17120</p> <p>City Tucson State AZ Zip Code 85731-7120</p> <p>Purpose of Disbursement Mobile Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138239</p> <p>Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; text-align: center;">M M</div> <div style="display: inline-block; text-align: center;">D D</div> <div style="display: inline-block; text-align: center;">Y Y Y Y</div> </div> <div style="display: inline-block; text-align: center;">07</div> <div style="display: inline-block; text-align: center;">05</div> <div style="display: inline-block; text-align: center;">2007</div> </p> <p>Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: center;">256.10</div></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p>	
<p>TOTAL This Period (last page this line number only) ▶</p>	

727.01

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D138240 Date of Disbursement
Mailing Address PO Box 17120	<div> <div>M</div><div>M</div> / <div>D</div><div>D</div> / <div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>07</div> / <div>05</div> / <div>2007</div> </div>
City Tucson State AZ Zip Code 85731-7120	Amount of Each Disbursement this Period
Purpose of Disbursement Mobile Phone	<div> <div>137.29</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D138269 Date of Disbursement
Mailing Address PO Box 15123	<div> <div>M</div><div>M</div> / <div>D</div><div>D</div> / <div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>07</div> / <div>26</div> / <div>2007</div> </div>
City Albany State NY Zip Code 12212-5123	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div> <div>125.32</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Vermont Tent Co	Transaction ID: D138338 Date of Disbursement
Mailing Address 14 Berard Dr	<div> <div>M</div><div>M</div> / <div>D</div><div>D</div> / <div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>09</div> / <div>19</div> / <div>2007</div> </div>
City So. Burl State VT Zip Code 05403	Amount of Each Disbursement this Period
Purpose of Disbursement Events (Field)	<div> <div>879.80</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div> <div>1142.41</div> </div>
TOTAL This Period (last page this line number only)	

28020052195

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.	Full Name (Last, First, Middle Initial)	Transaction ID: D138265
	VT Dept of Labor	Date of Disbursement
	Mailing Address 5 Green Mountain Drive PO Box 488	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>07 / 26 / 2007</div>
	City Montpelier State VT Zip Code 05601-0488	Amount of Each Disbursement this Period
	Purpose of Disbursement Miscellaneous (Gen. Camp. Exp.)	<div> <div></div> <div>4.03</div> </div>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	<div> <div>Category/</div> <div>Type</div> </div>
	State: District:	
B.	Full Name (Last, First, Middle Initial)	Transaction ID: D138235
	Credit Card Services	Date of Disbursement
	Mailing Address PO Box 405	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>07 / 05 / 2007</div>
	City Burlington State VT Zip Code 05402-0405	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Services	<div> <div></div> <div>998.82</div> </div>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	<div> <div>Category/</div> <div>Type</div> </div>
	State: District:	
C.	Full Name (Last, First, Middle Initial)	Transaction ID: D138244
	Comcast	Date of Disbursement
	Mailing Address 1500 Market St	<div> <div>MM</div> <div>DD</div> <div>YYYY</div> </div> <div>07 / 05 / 2007</div>
	City Philadelphia State PA Zip Code 19102-2148	Amount of Each Disbursement this Period
	Purpose of Disbursement Cable	<div> <div></div> <div>281.56</div> </div>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought:</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div> <div> <div>Disbursement For:</div> <div> 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </div> </div>	<div> <div>Category/</div> <div>Type</div> </div>
	State: District:	
	SUBTOTAL of Disbursements This Page (optional) ▶	<div> <div></div> <div>1002.85</div> </div>
	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)
 Friends of Bernie Sanders

<p>A. Full Name (Last, First, Middle Initial) LaLoma Restaurant</p> <p>Mailing Address 316 Massachusetts Ave NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138246</p> <p>Date of Disbursement 07 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 65.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) US Air</p> <p>Mailing Address Airport</p> <p>City Wash State DC Zip Code 20001</p> <p>Purpose of Disbursement Non Staff Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138247</p> <p>Date of Disbursement 07 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 419.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138238</p> <p>Date of Disbursement 07 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 532.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

532.17

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Accessline

Mailing Address 11201 SE 8th St.

City
Bellevue

State
WA

Zip Code
98004

Purpose of Disbursement
Cable

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138255

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

58.59

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Active Host

Mailing Address 22 N College St.

City
Schenectady

State
NY

Zip Code
12305

Purpose of Disbursement
Internet Access

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138253

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

169.95

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

USPO

Mailing Address Elmwood Avenue

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Postage (Gen. Camp. Exp.)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D138251

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

95.60

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D138272</p> <p>Date of Disbursement 07 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 260.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit card charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D138284</p> <p>Date of Disbursement 07 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 11.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D138273</p> <p>Date of Disbursement 07 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 2602.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

2862.84

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Cash Vault

Mailing Address

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement

Safety deposit box

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138285

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

77.55

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Maple Grove Gift Shop

Mailing Address

City
St. Johnsbury

State
VT

Zip Code

Purpose of Disbursement

Hospitality Refreshments

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138287

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

235.14

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement

Credit Card Services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138274

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

759.67

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

SUBTOTAL of Disbursements This Page (optional)

759.67

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)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement

Credit card charges

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138277

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

13.38

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Network Solutions

Mailing Address 4014 Gunn Highway, Suite 260

City
Tampa

State
FL

Zip Code
33618

Purpose of Disbursement

Consultant

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138275

Date of Disbursement

07 / 26 / 2007

Amount of Each Disbursement this Period

44.95

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

USPO

Mailing Address Elmwood Avenue

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement

Postage (Gen. Camp. Exp.)

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D138256

Date of Disbursement

07 / 05 / 2007

Amount of Each Disbursement this Period

725.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

<p>A. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D138299 Date of Disbursement 08 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 56.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Network Solutions</p> <p>Mailing Address 4014 Gunn Highway, Suite 260</p> <p>City Tampa State FL Zip Code 33618</p> <p>Purpose of Disbursement Consultant</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D138295 Date of Disbursement 08 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 44.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: D138300 Date of Disbursement 08 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 385.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

442.04

**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)
Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
Cash Vault

Transaction ID: D138308
Date of Disbursement

Mailing Address

08 / 21 / 2007

City State Zip Code
Washington DC 20002

Amount of Each Disbursement this Period

Purpose of Disbursement
Safety deposit box

21.90

Candidate Name

Category/
Type

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

[MEMO ITEM]

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
USPO

Transaction ID: D138311
Date of Disbursement

Mailing Address Elmwood Avenue

08 / 21 / 2007

City State Zip Code
Burlington VT 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
Postage (Gen. Camp. Exp.)

98.40

Candidate Name

Category/
Type

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

[MEMO ITEM]

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Sovernet

Transaction ID: D138301
Date of Disbursement

Mailing Address 276 E Allen St

08 / 21 / 2007

City State Zip Code
Winooski VT 05404-1570

Amount of Each Disbursement this Period

Purpose of Disbursement
Telephone

122.98

Candidate Name

Category/
Type

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

Office Sought: ☐ House ☐ Senate ☐ President
State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

122.98

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 33

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

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NAME OF COMMITTEE (In Full)
Friends of Bernie Sanders

<p>A. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138302</p> <p>Date of Disbursement 08 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 18.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit card charges</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138296</p> <p>Date of Disbursement 08 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 18.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Credit Card Services</p> <p>Mailing Address PO Box 405</p> <p>City Burlington State VT Zip Code 05402-0405</p> <p>Purpose of Disbursement Credit Card Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D138303</p> <p>Date of Disbursement 08 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 344.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

362.81

41077.89

press



FedEx® US Airbill
Express

Tracking Number
8636 0955 6485

1 From

Date

Sender's Name

Phone

Company

Address

City

State

Zip

2 Your Internal Billing Reference

3 To

Recipient's Name

Company

Address

City

State

Zip

To request a package be held at a specific FedEx location, give FedEx address book.

We cannot deliver to P.O. boxes or P.O. ZIP codes.

Drop/Pickup/Sign



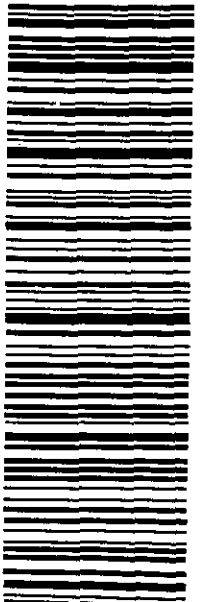
Part # 156297-435 RIT 10/07

IAD
DC-US
20510

WED - 30 JAN 82
STANDARD OVERNIGHT

5879 5560 9388

D-YKNA



2018708 29JAN08 12:21



4a Express Package Service

☐ FedEx Priority Overnight

☐ Next Business Morning[®] Priority

☐ Next Business Day[®] Priority

☐ FedEx 2Day

☐ FedEx 1Day Freight

☐ FedEx Freight

☐ FedEx Express Saver

☐ FedEx Standard Overnight

☐ Next Business Morning[®] Standard Delivery[®] NOT available.

☐ Next Business Day[®] Standard Delivery[®] NOT available.

☐ Next Business Day[®] Standard Delivery[®] NOT available.

☐ Next Business Day[®] Standard Delivery[®] NOT available.

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☐ Next Business Day[®] Standard Delivery[®] NOT available.

☐ Next Business Day[®] Standard Delivery[®] NOT available.

Packages up to 150 lbs.

FedEx First Overnight

Business next business morning

Standard Delivery[®] NOT available.

FedEx 2Day Freight

Standard Delivery[®] NOT available.

FedEx 1Day Freight

Standard Delivery[®] NOT available.

FedEx Express Saver

Standard Delivery[®] NOT available.

FedEx Standard Overnight

Standard Delivery[®] NOT available.

Next Business Morning[®] Standard Delivery[®] NOT available.

Next Business Day[®] Standard Delivery[®] NOT available.

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4b Express Freight Service

☐ FedEx 1Day Freight

☐ FedEx 2Day Freight

☐ FedEx 3Day Freight

☐ FedEx 4Day Freight

☐ FedEx 5Day Freight

☐ FedEx 6Day Freight

☐ FedEx 7Day Freight

☐ FedEx 8Day Freight

☐ FedEx 9Day Freight

☐ FedEx 10Day Freight

☐ FedEx 11Day Freight

☐ FedEx 12Day Freight

☐ FedEx 13Day Freight

☐ FedEx 14Day Freight

☐ FedEx 15Day Freight

☐ FedEx 16Day Freight

☐ FedEx 17Day Freight

☐ FedEx 18Day Freight

☐ FedEx 19Day Freight

☐ FedEx 20Day Freight

☐ FedEx 21Day Freight

☐ FedEx 22Day Freight

☐ FedEx 23Day Freight

☐ FedEx 24Day Freight

☐ FedEx 25Day Freight

☐ FedEx 26Day Freight

5 Packaging

☐ FedEx Envelope

☐ FedEx Mail Box

☐ FedEx Tube

☐ FedEx Other

☐ FedEx Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

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6 Special Handling

☐ FedEx Special Handling

☐ FedEx Special Handling

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☐ FedEx Special Handling

7 Payment

☐ Sender

☐ Recipient

☐ Third Party

☐ Credit Card

☐ Cash/Check

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

☐ Other

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☐ Other

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☐ Other

8 Residential Delivery Signature Options

☐ No Signature

☐ Direct Signature

☐ Indirect Signature

☐ Signature Required

☐ Signature Required

☐ Signature Required

☐ Signature Required

☐ Signature Required

☐ Signature Required

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NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

01-25-08

☐

UPS

☐

DHL

☐

AIRBORNE EXPRESS

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

02-01-08

28020052206

28020052207

