

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Friends of Rosa DeLauro

ADDRESS (number and street) 129 CHURCH STREET STE 818 Check if different than previously reported. (ACC) NEW HAVEN CT 06510 CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00238865 3. IS THIS REPORT NEW (N) OR AMENDED (A) STATE DISTRICT CT 03

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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 20 / 2016 through M M / D D / Y Y Y Y 11 / 28 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Charmel, Patrick, , Type or Print Name of Treasurer Charmel, Patrick, , Signature of Treasurer [Electronically Filed] Date M M / D D / Y Y Y Y 12 / 08 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name
Friends of Rosa DeLauro

Report Covering the Period: From: / / To: / /

	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))....	94385.45	1130709.91
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	94385.45	1129709.91
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	84736.40	661370.03
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1200.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	84736.40	660170.03
8. Cash on Hand at Close of Reporting Period (from Line 27).....	21792.05	
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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Friends of Rosa DeLauro

Report Covering the Period: From: / / To: / /

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="08"/> / <input type="text" value="2016"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2016"/> (date after general election) through <input type="text" value="11"/> / <input type="text" value="28"/> / <input type="text" value="2016"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="37850.00"/>	<input type="text" value="492414.68"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="6658.85"/>	<input type="text" value="52623.08"/>	<input type="text" value="25.01"/>
(iii) Total of contributions from individuals		
<input type="text" value="44508.85"/>	<input type="text" value="545037.76"/>	<input type="text" value="25.01"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="49876.60"/>	<input type="text" value="585672.15"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 90

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
94385.45	1130709.91	25.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	1200.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	184.83	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
94385.45	1132094.74	25.01

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 90

Write or Type Committee Name

Friends of Rosa DeLauro

Report Covering the Period: From: / / To: / /

II. DISBURSEMENTS

	COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="84736.40"/>	<input type="text" value="661370.03"/>	<input type="text" value="8328.79"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 90

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	1000.00	0.00
------	---------	------

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

0.00	1000.00	0.00
------	---------	------

21. OTHER DISBURSEMENTS

58050.00	501700.00	50.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

142786.40	1164070.03	8378.79
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

94385.45	1129709.91	25.01
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

84736.40	660170.03	8328.79
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	70193.00
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	94385.45
25. SUBTOTAL (add Line 23 and Line 24).....	164578.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	142786.40
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	21792.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 90	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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 Rosa DeLauro

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

Mailing Address 219 Bishop Street

City New Haven	State CT	Zip Code 06511-3717
-------------------	-------------	------------------------

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

Name of Employer GW Graduate School of Political Manage	Occupation Professor
--	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : C10731936

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Barneby, Mary, J., ,

Mailing Address 56 Chittenden Field Ln

City Madison	State CT	Zip Code 06443-2836
-----------------	-------------	------------------------

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

Name of Employer Girl Scouts of CT	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : C10724278

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Barocas Mayer, Melanie, , ,

Mailing Address 78 Hart Road

City Guilford	State CT	Zip Code 06437-1128
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Photographer
-----------------------------------	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1179.76

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10733042

Amount of Each Receipt this Period
100.00

Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 59 Tumblebrook Rd

City Woodbridge State CT Zip Code 06525-2533

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

Name of Employer Alexion Pharmaceuticals Occupation Chairman of the Board of Directors

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2016

Transaction ID : C10723304

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bender Fromson, Sandra, , ,

Mailing Address 1 Gold Street Apt. 14C

City Hartford State CT Zip Code 06103-2907

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

Name of Employer UCONN Occupation Adjunct Professor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2016

Transaction ID : C10726003

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 28 Mountain Road

City Wilton State CT Zip Code 06897

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

Name of Employer Ibiza Tapas Wine Bar Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : C10740453

Amount of Each Receipt this Period
 600.00

Memo Item

* In-Kind: Event Catering

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

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

2100.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 78 Lanes Pond Road

City Northford State CT Zip Code 06472-1124

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : **C10730290**

Amount of Each Receipt this Period
 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Brancati, Salvatore, J, , Jr.

Mailing Address 58 Vista Ter

City New Haven State CT Zip Code 06515-2402

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

Name of Employer Town of East Haven Occupation Economic Development Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 3400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : **C10733056**

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address 4903 Rock Spring Rd

City Arlington State VA Zip Code 22207-2705

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

Name of Employer Glover Park Group Occupation Government Relations Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2016

Transaction ID : **C10731671**

Amount of Each Receipt this Period
 500.00

Memo Item

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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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Calabresi, Anne, , ,
 Mailing Address 639 Amity Rd
 City Woodbridge State CT Zip Code 06525-1206
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 24 2016
Transaction ID : C10723214
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Carr, Cynthia, , ,
 Mailing Address 44 Brookwood Drive
 City Woodbridge State CT Zip Code 06525-2635
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Yale University Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 03 2016
Transaction ID : C10731131
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Carrafiello, Joan, , ,
 Mailing Address 82 Cali Dr
 City Shelton State CT Zip Code 06484-3515
 FEC ID number of contributing federal political committee. **C**
 Name of Employer N/A Occupation Retired
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 21 2016
Transaction ID : C10721705
 Amount of Each Receipt this Period
 100.00
 Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 82 Cali Dr

City Shelton State CT Zip Code 06484-3515

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10727187

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 82 Cali Dr

City Shelton State CT Zip Code 06484-3515

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

Name of Employer N/A Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **250.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : C10731980

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 15 Old Still Rd

City Woodbridge State CT Zip Code 06525-1101

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

Name of Employer Yale University Occupation Physician

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **300.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : C10733070

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **250.00**

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

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

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

FOR LINE NUMBER: PAGE 12 OF 90
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Geballe, Josh, , ,
Mailing Address 97 Prospect Ave

City: Guilford State: CT Zip Code: 06437-3114

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

Name of Employer: Core Informatics Occupation: CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1500.00

Date of Receipt: 10 / 29 / 2016
Transaction ID : **C10728179**

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Giles, Carleton, , ,
Mailing Address 22 Belvidere Ter

City: Middletown State: CT Zip Code: 06457-2407

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

Name of Employer: Occupation: Law Enforcement

State of CT: Election Cycle-to-Date: 2250.00

Receipt For: 2016
 Primary General
 Other (specify) ▼

Date of Receipt: 10 / 31 / 2016
Transaction ID : **C10729400**

Amount of Each Receipt this Period: 500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Goldblum, David, , ,
Mailing Address 53 Sunset Beach Rd

City: Branford State: CT Zip Code: 06405-5028

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

Name of Employer: Hartford Public Schools Occupation: Principal

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 10 / 24 / 2016
Transaction ID : **C10722546**

Amount of Each Receipt this Period: 2700.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 3700.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Gomez, Christina, M., ,

Mailing Address 20 Anvil Dr

City Avon State CT Zip Code 06001-3201

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

Name of Employer Occupation
Yale New Haven Oncologist

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 23 2016

Transaction ID : **C10726002**

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 576 Chapel St Apt 5

City New Haven State CT Zip Code 06511-7056

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

Name of Employer Occupation
Self Management Consulting

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
508.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 08 2016

Transaction ID : **C10736104**

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 10 N Branford Rd

City Wallingford State CT Zip Code 06492-2712

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

Name of Employer Occupation
Blue State Coffee CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3084.50

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 24 2016

Transaction ID : **C10722768**

Amount of Each Receipt this Period
2000.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Hauser, Debra, P., ,
Mailing Address 12 Buell Ct

City Clinton State CT Zip Code 06413-2602

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

Name of Employer Self-Employed Occupation Psychologist

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : **C10722418**

Amount of Each Receipt this Period
2700.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Horowitz, Nina, , ,
Mailing Address 22 Highland St

City New Haven State CT Zip Code 06511-1330

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

Name of Employer Yale University Occupation Surgeon

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2016

Transaction ID : **C10728234**

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Kahn, Gerald, , ,
Mailing Address 325 Saint Ronan Street

City New Haven State CT Zip Code 06511-2362

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : **C10730970**

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3050.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 7819 Montvale Way

City McLean State VA Zip Code 22102-2029

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

Name of Employer Van Scoyoc Associates Inc. Occupation Vice President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : C10730973

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Kidd, Judith R., , ,

Mailing Address 1041 Forest Road

City New Haven State CT Zip Code 06515-2416

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

Name of Employer Yale Un School of Medicine Occupation Research Scientist

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1915.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10733064

Amount of Each Receipt this Period
400.00

Memo Item

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

Mailing Address 20 Cromwell Pl

City Old Saybrook State CT Zip Code 06475-2512

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

Name of Employer Gaffney, Bennett & Assoc Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : C10726509

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1900.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 31 Hunters Rdg

City Rocky Hill State CT Zip Code 06067-1742

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

Name of Employer Kozak & Saina, LLC Occupation Gov Relations

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2016

Transaction ID : C10722110

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 10 Woody Ln

City Westport State CT Zip Code 06880-2259

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

Name of Employer None Occupation Volunteer

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : C10729676

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 120 Bunker Hill Rd

City Andover State CT Zip Code 06232-1301

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

Name of Employer Penn Globe Occupation CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : C10729824

Amount of Each Receipt this Period
250.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 313 Audubon Court

City: New Haven State: CT Zip Code: 06510-1203

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

Name of Employer: Self-Employed Occupation: Investor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1650.00

Date of Receipt: 10 / 31 / 2016

Transaction ID : **C10733031**

Amount of Each Receipt this Period: 100.00

Memo Item

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

Mailing Address 536 Mine Hill Rd

City: Fairfield State: CT Zip Code: 06824-2151

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

Name of Employer: Self-employed Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 10 / 21 / 2016

Transaction ID : **C10722400**

Amount of Each Receipt this Period: 2700.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Malcynsky, Jay, F., ,

Mailing Address 25 Parkers Point Rd

City: Chester State: CT Zip Code: 06412

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

Name of Employer: Goffrey Bennet & Associates Occupation: Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 24 / 2016

Transaction ID : **C10726000**

Amount of Each Receipt this Period: 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
McCue, William, J., ,
Mailing Address 140 Elbridge Road

City: New Britain State: CT Zip Code: 06052-1546

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

Name of Employer: The McCue Mortgage Company Occupation: President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: **750.00**

Date of Receipt: 11 / 08 / 2016
Transaction ID : C10737103

Amount of Each Receipt this Period: **500.00**

Memo Item

B. Full Name (Last, First, Middle Initial)
Mederos, Leticia, , ,
Mailing Address 17117 Trundle Road

City: Dickerson State: MD Zip Code: 20842-9348

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

Name of Employer: US Senate Occupation: Policy Director

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: **1050.00**

Date of Receipt: 10 / 23 / 2016
Transaction ID : C10726119

Amount of Each Receipt this Period: **500.00**

Memo Item

C. Full Name (Last, First, Middle Initial)
Morgan, David, , ,
Mailing Address 138 Manor Hill Rd

City: Stratford State: CT Zip Code: 06614-1657

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

Name of Employer: Peerfocus Occupation: President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: **300.00**

Date of Receipt: 10 / 28 / 2016
Transaction ID : C10727170

Amount of Each Receipt this Period: **100.00**

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Morton, Margaret, L., ,
Mailing Address 369 Pine Street

City Middletown State CT Zip Code 06457-4143

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

Name of Employer Northeast Utilities System Occupation Vice President- Governmental Affairs

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : C10731677

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Morton, S. Antoinette, A., ,
Mailing Address 70 Morningside Dr S

City Westport State CT Zip Code 06880-5415

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

Name of Employer S. Antoinette Morton LLC Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : C10733026

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Palumbo, David, P., ,
Mailing Address 77 Glenmeadow Dr

City Northford State CT Zip Code 06472-1624

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

Name of Employer Palumbo Trucking Occupation Owner

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10733060

Amount of Each Receipt this Period
200.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 90	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Palumbo, Sandra, G., ,

Mailing Address 304 Tyler St

City East Haven	State CT	Zip Code 06512-2825
--------------------	-------------	------------------------

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

Name of Employer P&P Enterprise Co LLC	Occupation Bookkeeper
---	--------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10733059

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 61 Shore Road

City Clinton	State CT	Zip Code 06413-2363
-----------------	-------------	------------------------

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

Name of Employer Prospect Products, Inc	Occupation Corp Officer
--	----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : C10731682

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 306 Forest Street Extension

City Hamden	State CT	Zip Code 06518-2715
----------------	-------------	------------------------

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

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
410.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : C10731678

Amount of Each Receipt this Period
50.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Pelletier, Lori, , ,
 Mailing Address 21 Maple Street
 City Middletown State CT Zip Code 06457-3844
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CT AFL-CIO Occupation Executive Secretary-Treasurer
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016
Transaction ID : C10730611
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Perlmutter, Irving, , ,
 Mailing Address 78 Colony Road
 City New Haven State CT Zip Code 06511-2812
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self Occupation Attorney
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016
Transaction ID : C10731680
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
Ping, Hu, , ,
 Mailing Address 12 Highview Rd
 City Madison State CT Zip Code 06443-2554
 FEC ID number of contributing federal political committee. **C**
 Name of Employer New Haven's Taste of China Occupation Owner
 Receipt For: 2016
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 20 / 2016
Transaction ID : C10740458
 Amount of Each Receipt this Period
 400.00
 Memo Item
 * In-Kind: Event Catering

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 90	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 108 E Rock Road

City New Haven	State CT	Zip Code 06511-1340
-------------------	-------------	------------------------

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

Name of Employer AASCC	Occupation Program Mgr
---------------------------	---------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2016

Transaction ID : C10725981

Amount of Each Receipt this Period
 _____ 500.00

Memo Item

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

Mailing Address 45 Edgehill Rd

City New Haven	State CT	Zip Code 06511-1343
-------------------	-------------	------------------------

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

Name of Employer Yale	Occupation physician
--------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2016

Transaction ID : C10729401

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

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

Mailing Address 403 Saint Ronan St

City New Haven	State CT	Zip Code 06511-2224
-------------------	-------------	------------------------

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

Name of Employer Yale Law School	Occupation Professor
-------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : C10733067

Amount of Each Receipt this Period
 _____ 100.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 28 Watch Hill Cir

City Cromwell State CT Zip Code 06416-1211

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

Name of Employer N/A Occupation Not Employed

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2016

Transaction ID : **C10721450**

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 166 E Rock Rd

City New Haven State CT Zip Code 06511-1326

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : **C10727171**

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 166 E Rock Rd

City New Haven State CT Zip Code 06511-1326

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

Name of Employer None Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : **C10730723**

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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

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

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

FOR LINE NUMBER: PAGE 24 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 104 Linden St

City New Haven State CT Zip Code 06511-2425

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

Name of Employer Yale University Occupation Academic

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : C10727163

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Sack, Allen, L, ,

Mailing Address 760 Edgewood Ave

City New Haven State CT Zip Code 06515-2217

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

Name of Employer NA Occupation Retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10730663

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 35 Sunbrook Rd

City Woodbridge State CT Zip Code 06525-1832

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

Name of Employer retired Occupation retired

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
975.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10733025

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 25 OF 90	
<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 201 Everit St

City New Haven	State CT	Zip Code 06511-1335
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FEC ID number of contributing federal political committee. **C**

Name of Employer Yale University	Occupation Professor
-------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : C10730304

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 50 Woodside Terrace

City New Haven	State CT	Zip Code 06515-2021
-------------------	-------------	------------------------

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

Name of Employer Sklarz, Gallant & Temkin, PC	Occupation attorney
--	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 20 / 2016

Transaction ID : C10727108

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 14 Honeysuckle Ln

City Milford	State CT	Zip Code 06461-1671
-----------------	-------------	------------------------

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

Name of Employer Hurwitz Sagarin Slossberg & Knuff	Occupation Attorney
---	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2016

Transaction ID : C10731845

Amount of Each Receipt this Period
250.00

Memo Item

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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address PO Box 9632

City: New Haven State: CT Zip Code: 06535-0632

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

Name of Employer: Gateway Terminals Occupation: President

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 2700.00

Date of Receipt: 10 / 21 / 2016

Transaction ID : **C10722078**

Amount of Each Receipt this Period: 2700.00

Memo Item

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

Mailing Address 913 Green Cir

City: Orange State: CT Zip Code: 06477-1737

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

Name of Employer: Sunset Shores Occupation: Admin

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 500.00

Date of Receipt: 11 / 02 / 2016

Transaction ID : **C10730654**

Amount of Each Receipt this Period: 500.00

Memo Item

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

Mailing Address 150 Deepwood Drive

City: Guilford State: CT Zip Code: 06437-3224

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

Name of Employer: Prime Technology Occupation: Chairman

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 1050.00

Date of Receipt: 11 / 02 / 2016

Transaction ID : **C10733024**

Amount of Each Receipt this Period: 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3450.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 90	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 1 Eton Pl

City Farmington	State CT	Zip Code 06032-1546
--------------------	-------------	------------------------

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

Name of Employer Tomasso Group	Occupation Chairman
-----------------------------------	------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : C10736098

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 5 Stone Brook Ln

City Cos Cob	State CT	Zip Code 06807-1113
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation Retired
-------------------------	-----------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10733053

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Tyson, Audrey, D, ,

Mailing Address 471 Whalley Ave
Unit H

City New Haven	State CT	Zip Code 06511-3068
-------------------	-------------	------------------------

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

Name of Employer Self-employed	Occupation Social Worker
-----------------------------------	-----------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : C10725979

Amount of Each Receipt this Period
125.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	1125.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 28 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 880 Racebrook Rd

City Orange State CT Zip Code 06477-1235

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

Name of Employer Retired Occupation Pathologist (M.D.)

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : C10730610

Amount of Each Receipt this Period
 25.00

Memo Item

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

Mailing Address 963 Townsend Avenue

City New Haven State CT Zip Code 06512-1904

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

Name of Employer Workforce Alliance Occupation President & CEO

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 02 / 2016

Transaction ID : C10733066

Amount of Each Receipt this Period
 200.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Weiner, Gerald, T, ,

Mailing Address 15 Bishop Dr

City Woodbridge State CT Zip Code 06525-2301

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

Name of Employer Weinstein Weiner & Ignal Occupation Attorney

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2016

Transaction ID : C10723153

Amount of Each Receipt this Period
 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **1225.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 90
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 55 Oakland Drive

City Oakdale	State CT	Zip Code 06370-1025
-----------------	-------------	------------------------

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

Name of Employer Cross Sound Ferry	Occupation Owner
---------------------------------------	---------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10731676

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 300 Davis Street

City Hamden	State CT	Zip Code 06517
----------------	-------------	-------------------

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

Name of Employer Yale University	Occupation Professor
-------------------------------------	-------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10734519A

Amount of Each Receipt this Period
50.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Conduit total listed in Agg. field	Occupation Conduit total listed in Agg. field
--	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
713.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10734519AB

Amount of Each Receipt this Period
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address 300 Davis Street

City Hamden State CT Zip Code 06517

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

Name of Employer Yale University Occupation Professor

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
375.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : **C10736112A**

Amount of Each Receipt this Period
50.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
713.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : **C10736112AB**

Amount of Each Receipt this Period
50.00

Memo Item

Note: Above Contribution earmarked through this organization.

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

Mailing Address 4958 Butterworth Place NW

City Washington State DC Zip Code 20016-4354

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

Name of Employer Ledge Counsel Inc. Occupation Consultant

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : **C10734516A**

Amount of Each Receipt this Period
100.00

Memo Item

* Earmarked Contribution: See Below

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

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

150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 90	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
713.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10734516AB

Amount of Each Receipt this Period
100.00

Memo Item

Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Tucker-Foreman, Carol, L, ,

Mailing Address 5600 Wisconsin Avenue
Apt. 502

City Chevy Chase	State MD	Zip Code 20815-4410
---------------------	-------------	------------------------

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

Name of Employer CONSUMER FEDERATION OF AMERICA	Occupation Distinguished Fellow
--	------------------------------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : C10734518A

Amount of Each Receipt this Period
500.00

Memo Item

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer	Occupation Conduit total listed in Agg. field
------------------	--

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
713.74

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10734518AB

Amount of Each Receipt this Period
500.00

Memo Item

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)..... ▶	500.00
TOTAL This Period (last page this line number only)..... ▶	37850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
AFL-CIO COPE POLITICAL CONTRIBUTIONS COMMITTEE

Mailing Address 815 16th St NW

City Washington	State DC	Zip Code 20006-4101
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : C10730719

Amount of Each Receipt this Period
1500.00

Memo Item

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

Mailing Address 1932 Wynnton Rd

City Columbus	State GA	Zip Code 31999-0001
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 21 / 2016

Transaction ID : C10722118

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION FOR JUSTICE

Mailing Address 777 6TH STREET, NW
SUITE 200

City WASHINGTON	State DC	Zip Code 20001
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : C10737110

Amount of Each Receipt this Period
2000.00

Memo Item

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 90
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)

Mailing Address 222 S Prospect Ave
c/o Finance Department

City Park Ridge State IL Zip Code 60068-4037

FEC ID number of contributing federal political committee. **C** C00173153

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 31 2016

Transaction ID : C10730288

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 7th St NW
Ste 700

City Washington State DC Zip Code 20004-2801

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 23 2016

Transaction ID : C10723152

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
American Medical Response PAC

Mailing Address 6200 S Syracuse Way
Ste 200

City Greenwood Village State CO Zip Code 80111-4739

FEC ID number of contributing federal political committee. **C** C00389585

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 23 2016

Transaction ID : C10723151

Amount of Each Receipt this Period
1000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : C10724370

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9312 OLD GEORGETOWN ROAD

City BETHESDA State MD Zip Code 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : C10737108

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CAP-PAC SEPARATE SEGREGATED FUND OF NATIONAL COMMUNITY ACTION FOUNDATION, INC.

Mailing Address 1 Massachusetts Ave NW
Ste 310

City Washington State DC Zip Code 20001-1420

FEC ID number of contributing federal political committee. **C** C00163048

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
8000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : C10736109

Amount of Each Receipt this Period
1000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 90
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

Mailing Address 100 Indiana Ave NW

City Washington	State DC	Zip Code 20001-2143
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2016

Transaction ID : C10730292

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

Mailing Address 100 Indiana Ave NW

City Washington	State DC	Zip Code 20001-2143
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00023580

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : C10731712

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10728188

Amount of Each Receipt this Period
2000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
DELTA AIR LINES POLITICAL ACTION COMMITTEE

Mailing Address 1212 New York Ave NW
Ste 200

City Washington State DC Zip Code 20005-6609

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : **C10736111**

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEERS

Mailing Address 1125 17TH ST, NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : **C10724371**

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Fresh Produce PAC

Mailing Address 1901 Pennsylvania Ave NW
Ste 1100

City Washington State DC Zip Code 20006-3412

FEC ID number of contributing federal political committee. **C** C00040725

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 08 / 2016

Transaction ID : **C10737109**

Amount of Each Receipt this Period
1000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL COMM

Mailing Address 7234 Parkway Dr

City Hanover	State MD	Zip Code 21076-1307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : C10731593

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Laborers' Political League - LIUNA

Mailing Address 905 16TH ST., N.W.
SECOND FLOOR

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2016

Transaction ID : C10731598

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 8403 Colesville Rd
Ste 1550

City Silver Spring	State MD	Zip Code 20910-6374
-----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00358812

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : C10723217

Amount of Each Receipt this Period
2000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 King St
Ste 600

City Alexandria State VA Zip Code 22314-2965

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2016

Transaction ID : C10731590

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL POSTAL MAIL HANDLERS UNION - DIVISION OF LABORERS' INT'L UNION OF NORTH AMERICA

Mailing Address 905 16TH ST., NW
SECOND FLOOR

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00345306

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 07 / 2016

Transaction ID : C10736110

Amount of Each Receipt this Period
2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
National Stone, Sand and Gravel PAC

Mailing Address 1605 King St

City Alexandria State VA Zip Code 22314-2726

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2016

Transaction ID : C10731592

Amount of Each Receipt this Period
1000.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
Nelson Mullins Riley & Scarborough LLC PAC

Mailing Address 1320 Main St
FI 17

City Columbia State SC Zip Code 29201-3268

FEC ID number of contributing federal political committee. **C** C00278895

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 01 / 2016

Transaction ID : C10730291

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Oldcastle Materials Inc. PAC

Mailing Address 101 Constitution Ave NW
600 W

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00346353

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
4500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2016

Transaction ID : C10723219

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
OPERATING ENGINEERS LOCAL 478 POLITICAL ACTION COMMITTEE (OE478PAC)

Mailing Address 1965 Dixwell Ave

City Hamden State CT Zip Code 06514-2407

FEC ID number of contributing federal political committee. **C** C00434076

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : C10723156

Amount of Each Receipt this Period
2500.00

Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 90	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Full Name (Last, First, Middle Initial)
PLANNED PARENTHOOD ACTION FUND INC. PAC

Mailing Address 434 WEST 33RD STREET

City NEW YORK	State NY	Zip Code 10001
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00314617

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2876.60

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Transaction ID : C10730299

Amount of Each Receipt this Period
376.60

Memo Item

* In-Kind: Staff Time

B. Full Name (Last, First, Middle Initial)
Radiological Society of CT Fed PAC

Mailing Address 53 Russ St
FI 2

City Hartford	State CT	Zip Code 06106-1523
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00467373

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 26 / 2016

Transaction ID : C10724369

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Sierra Club Political Cmte

Mailing Address 85 SECOND STREET 2ND FLR.

City SAN FRANCISCO	State CA	Zip Code 94105
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FEC ID number of contributing federal political committee. **C** C00135368

Name of Employer	Occupation
------------------	------------

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2016

Transaction ID : C10728211

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2376.60
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 41 OF 90
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

A. Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 23 / 2016

Transaction ID : C10723150

Amount of Each Receipt this Period
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

5000.00

49876.60

**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 42 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. 129 Church St LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016	
Mailing Address 129 Church St FI 2			FEC Identification Number C	
City New Haven	State CT	Zip Code 06510-2026	Amount of Each Disbursement this Period 700.00	
Purpose of Disbursement Office Rent		Category/ Type	Transaction ID : D596544	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016	
Mailing Address 14 Arrow St.			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02158	Amount of Each Disbursement this Period 3.95	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D596103	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2016	
Mailing Address 14 Arrow St.			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02158	Amount of Each Disbursement this Period 22.13	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D596104	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	726.08
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)		PAGE 43 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 14 Arrow St.			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02158	Amount of Each Disbursement this Period 1.98	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D596353	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016	
Mailing Address 14 Arrow St.			FEC Identification Number C	
City Cambridge	State MA	Zip Code 02158	Amount of Each Disbursement this Period 0.16	
Purpose of Disbursement Credit Card Processing Fee		Category/ Type	Transaction ID : D595607	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Alumni Association of the Boys & Girls Club of the Lower Naugatuck Valley			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 1 Positive Pl			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-2362	Amount of Each Disbursement this Period 160.00	
Purpose of Disbursement Print Advertisement		Category/ Type	Transaction ID : D596481	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	162.14
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 44 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Blanco, Sonia, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 28 Mountain Road			FEC Identification Number C		
City Wilton	State CT	Zip Code 06897	Amount of Each Disbursement this Period 600.00		
Purpose of Disbursement Event Catering		Category/ Type	Transaction ID : D598042		
Candidate Name		<input type="checkbox"/> Memo Item * In-Kind Received			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Caffe Bravo			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 794 Orange St			FEC Identification Number C		
City New Haven	State CT	Zip Code 06511-2508	Amount of Each Disbursement this Period 553.02		
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D596551		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Citizens Bank			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2016		
Mailing Address 209 Church Street			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-1801	Amount of Each Disbursement this Period 1563.24		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D597908		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2716.26
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 45 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Citizens Bank			Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2016		
Mailing Address 209 Church Street			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-1801	Amount of Each Disbursement this Period 208.68		
Purpose of Disbursement Bank Service Charge		Category/ Type	Transaction ID : D597691		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Citizens Bank			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 209 Church Street			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-1801	Amount of Each Disbursement this Period 1732.50		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D596528		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. Commissioner of Revenue Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address PO Box 2931			FEC Identification Number C		
City Hartford	State CT	Zip Code 06104-2931	Amount of Each Disbursement this Period 107.63		
Purpose of Disbursement Payroll Taxes		Category/ Type	Transaction ID : D596529		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2048.81
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Commissioner of Revenue Services		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2016
Mailing Address PO Box 2931		FEC Identification Number C
City Hartford	State CT	Zip Code 06104-2931
Purpose of Disbursement Payroll Taxes		Amount of Each Disbursement this Period 107.63
Candidate Name		Transaction ID : D597907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) B. DNA Campaigns		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2016
Mailing Address 760 Chapel St		FEC Identification Number C
City New Haven	State CT	Zip Code 06510
Purpose of Disbursement Get-Out-The-Vote Canvassing Services		Amount of Each Disbursement this Period 7500.00
Candidate Name		Transaction ID : D597616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

Full Name (Last, First, Middle Initial) c. Docuprint & Imaging		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address 27 Whitney Avenue		FEC Identification Number C
City New Haven	State CT	Zip Code 06510-1219
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 187.71
Candidate Name		Transaction ID : D596548
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: _____	District: _____	

SUBTOTAL of Disbursements This Page (optional).....▶	7795.34
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 47 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Docuprint & Imaging			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 27 Whitney Avenue			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-1219	Amount of Each Disbursement this Period 3075.08		
Purpose of Disbursement Printing		Category/ Type	Transaction ID : D596557		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Docuprint & Imaging			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016		
Mailing Address 27 Whitney Avenue			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-1219	Amount of Each Disbursement this Period 1661.83		
Purpose of Disbursement Printing		Category/ Type	Transaction ID : D596477		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. FirstData Merchant Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2016		
Mailing Address 1 Western Maryland Pkwy			FEC Identification Number C		
City Hagerstown	State MD	Zip Code 21740	Amount of Each Disbursement this Period 1061.52		
Purpose of Disbursement Merchant Fees		Category/ Type	Transaction ID : D597692		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	5798.43
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 48 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Frontier		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address PO Box 20550		FEC Identification Number C
City Rochester	State NY	Zip Code 14602-0550
Purpose of Disbursement Telephone Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 180.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596549
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Frontier		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO Box 20550		FEC Identification Number C
City Rochester	State NY	Zip Code 14602-0550
Purpose of Disbursement Telephone Services	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 180.88	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596478
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) c. Ideal Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO Box 8488		FEC Identification Number C
City New Haven	State CT	Zip Code 06531-0488
Purpose of Disbursement Printing	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 1818.59	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596479
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	2180.35
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Ideal Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016
Mailing Address PO Box 8488		FEC Identification Number C
City New Haven	State CT	Zip Code 06531-0488
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 329.69
Candidate Name	Category/ Type	Transaction ID : D596507
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Ideal Printing		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 8488		FEC Identification Number C
City New Haven	State CT	Zip Code 06531-0488
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 3615.90
Candidate Name	Category/ Type	Transaction ID : D596531
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) c. Ideal Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address PO Box 8488		FEC Identification Number C
City New Haven	State CT	Zip Code 06531-0488
Purpose of Disbursement Printing		Amount of Each Disbursement this Period 2228.81
Candidate Name	Category/ Type	Transaction ID : D596547
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	6174.40
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Ideal Printing		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address PO Box 8488		FEC Identification Number C
City New Haven	State CT	Zip Code 06531-0488
Purpose of Disbursement Printing	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 946.52	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596554
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Intuit		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016
Mailing Address 2632 Marine Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Payroll Processing Fee	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D597904
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Intuit		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2016
Mailing Address 2632 Marine Way		FEC Identification Number C
City Mountain View	State CA	Zip Code 94043-1126
Purpose of Disbursement Payroll Processing Fee	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 3.50	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D597905
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	953.52
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 51 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Kate's Hot Air Balloons			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 1230 Johnson Rd			FEC Identification Number C		
City Woodbridge	State CT	Zip Code 06525-2019	Amount of Each Disbursement this Period 825.00		
Purpose of Disbursement Event Supplies		Category/ Type	Transaction ID : D596552		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Kron Chocolatier			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address 5300 Wisconsin Avenue NW			FEC Identification Number C		
City Washington	State DC	Zip Code 20015-2013	Amount of Each Disbursement this Period 45.00		
Purpose of Disbursement Gifts for Supporters		Category/ Type	Transaction ID : D596506		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. La Voz Hispana			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 51 Elm St, Ste 307			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510	Amount of Each Disbursement this Period 650.00		
Purpose of Disbursement Print Advertisement		Category/ Type	Transaction ID : D596534		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1520.00
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 52 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. MitchCo Tent & Party Rentals

Full Name (Last, First, Middle Initial)
Mailing Address 3129 Main St

City Stratford State CT Zip Code 06614

Purpose of Disbursement Event Rental Equipment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 11 / 10 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 657.51

Transaction ID : D597632

Memo Item

B. Mohegan Sun

Full Name (Last, First, Middle Initial)
Mailing Address 1 Mohegan Sun Blvd

City Uncasville State CT Zip Code 06382-1355

Purpose of Disbursement Event Space Rental

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 7063.15

Transaction ID : D596559

Memo Item

C. Myers Flower Shops

Full Name (Last, First, Middle Initial)
Mailing Address 1008 Main Street

City Branford State CT Zip Code 06405-3773

Purpose of Disbursement Flowers

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 449.26

Transaction ID : D596558

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 8169.92

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 53 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. New Haven Democratic Town Committee			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 24 Kneeland Rd			FEC Identification Number C		
City New Haven	State CT	Zip Code 06512-5005	Amount of Each Disbursement this Period 250.00		
Purpose of Disbursement Print Advertisement		Category/Type	Transaction ID : D596555		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. PCMS, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 1050 17th Street, NW Suite 590			FEC Identification Number C		
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 2638.72		
Purpose of Disbursement Accounting Services		Category/Type	Transaction ID : D596097		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PCMS, LLC			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016		
Mailing Address 1050 17th Street, NW Suite 590			FEC Identification Number C		
City Washington	State DC	Zip Code 20036	Amount of Each Disbursement this Period 1170.29		
Purpose of Disbursement Accounting Services		Category/Type	Transaction ID : D596483		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	4059.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Penfield Communications			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address PO Box 9451			FEC Identification Number C		
City New Haven	State CT	Zip Code 06534-0451	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement Print Advertisement		Category/Type	Transaction ID : D596533		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Ping, Hu, , ,			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016		
Mailing Address 12 Highview Rd			FEC Identification Number C		
City Madison	State CT	Zip Code 06443-2554	Amount of Each Disbursement this Period 400.00		
Purpose of Disbursement Event Catering		Category/Type	Transaction ID : D598046		
Candidate Name		Memo Item <input type="checkbox"/> * In-Kind Received			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PLANNED PARENTHOOD ACTION FUND INC. PAC			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2016		
Mailing Address 434 WEST 33RD STREET			FEC Identification Number C C00314617		
City NEW YORK	State NY	Zip Code 10001	Amount of Each Disbursement this Period 376.60		
Purpose of Disbursement Staff Time		Category/Type	Transaction ID : D595873		
Candidate Name		Memo Item <input type="checkbox"/> * In-Kind Received			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1276.60
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 55 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. ScreenTek Printing			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016		
Mailing Address 355 Sackett Point Road			FEC Identification Number C		
City North Haven	State CT	Zip Code 06473	Amount of Each Disbursement this Period 5716.31		
Purpose of Disbursement Printing		Category/ Type	Transaction ID : D596532		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Simply Serving, LLC			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2016		
Mailing Address 344 Woodland Ln			FEC Identification Number C		
City Orange	State CT	Zip Code 06477	Amount of Each Disbursement this Period 926.58		
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597635		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) c. The Hartford			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2016		
Mailing Address PO Box 2907			FEC Identification Number C		
City Hartford	State CT	Zip Code 06104-2907	Amount of Each Disbursement this Period 126.03		
Purpose of Disbursement Insurance		Category/ Type	Transaction ID : D597637		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	6768.92
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 56 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. The Hartford			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2016	
Mailing Address PO Box 2907			FEC Identification Number C	
City Hartford	State CT	Zip Code 06104-2907	Amount of Each Disbursement this Period 126.03	
Purpose of Disbursement Insurance		Category/Type	Transaction ID : D597638	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Tickey, Jimmy, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016	
Mailing Address 6 Coachmans Ln			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-5001	Amount of Each Disbursement this Period 53.20	
Purpose of Disbursement Mileage Reimbursement		Category/Type	Transaction ID : D597643	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Tickey, Jimmy, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2016	
Mailing Address 6 Coachmans Ln			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-5001	Amount of Each Disbursement this Period 230.69	
Purpose of Disbursement Petty Cash Replenishment		Category/Type	Transaction ID : D597630	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	409.92
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 57 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Tickey, Jimmy, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2016	
Mailing Address 6 Coachmans Ln			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-5001	Amount of Each Disbursement this Period 1818.12	
Purpose of Disbursement Payroll		Category/ Type	Transaction ID : D597903	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Tickey, Jimmy, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 6 Coachmans Ln			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-5001	Amount of Each Disbursement this Period 203.84	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : D596550	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Tickey, Jimmy, , Mr.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 6 Coachmans Ln			FEC Identification Number C	
City Shelton	State CT	Zip Code 06484-5001	Amount of Each Disbursement this Period 169.02	
Purpose of Disbursement Mileage Reimbursement		Category/ Type	Transaction ID : D596556	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2190.98
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 58 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Tickey, Jimmy, , Mr.,		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 6 Coachmans Ln		FEC Identification Number C
City Shelton	State CT	Zip Code 06484-5001
Purpose of Disbursement Payroll		Amount of Each Disbursement this Period 1818.12
Candidate Name	Category/ Type	Transaction ID : D596527
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. Tickey, Jimmy, , Mr.,		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016
Mailing Address 6 Coachmans Ln		FEC Identification Number C
City Shelton	State CT	Zip Code 06484-5001
Purpose of Disbursement Mileage Reimbursement		Amount of Each Disbursement this Period 143.36
Candidate Name	Category/ Type	Transaction ID : D596504
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. Tickey, Jimmy, , Mr.,		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address 6 Coachmans Ln		FEC Identification Number C
City Shelton	State CT	Zip Code 06484-5001
Purpose of Disbursement Mileage Reimbursement		Amount of Each Disbursement this Period 283.36
Candidate Name	Category/ Type	Transaction ID : D596480
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2244.84
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	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. United Parcel Service UPS			Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016		
Mailing Address PO Box 7247-0244			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19170-0001	Amount of Each Disbursement this Period 48.72		
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : D596503		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. United Parcel Service UPS			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address PO Box 7247-0244			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19170-0001	Amount of Each Disbursement this Period 137.91		
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : D596553		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. United Parcel Service UPS			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016		
Mailing Address PO Box 7247-0244			FEC Identification Number C		
City Philadelphia	State PA	Zip Code 19170-0001	Amount of Each Disbursement this Period 91.94		
Purpose of Disbursement Shipping		Category/ Type	Transaction ID : D597645		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	278.57
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. United States Postal Service USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address Brewery St		FEC Identification Number C
City New Haven	State CT	Zip Code 06511
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 1950.21
Candidate Name	Category/ Type	Transaction ID : D596475
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. United States Postal Service USPS		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2016
Mailing Address Brewery St		FEC Identification Number C
City New Haven	State CT	Zip Code 06511
Purpose of Disbursement Postage		Amount of Each Disbursement this Period 360.00
Candidate Name	Category/ Type	Transaction ID : D596476
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. United States Postal Service USPS		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2016
Mailing Address Brewery St		FEC Identification Number C
City New Haven	State CT	Zip Code 06511
Purpose of Disbursement Shipping		Amount of Each Disbursement this Period 425.00
Candidate Name	Category/ Type	Transaction ID : D596545
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2735.21
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 Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 1115		FEC Identification Number C
City Richmond	State VA	Zip Code 23218-1115
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 155.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596530
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2016
Mailing Address PO Box 1115		FEC Identification Number C
City Richmond	State VA	Zip Code 23218-1115
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 130.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D597906
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. Virginia Department of Taxation		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2016
Mailing Address PO Box 1115		FEC Identification Number C
City Richmond	State VA	Zip Code 23218-1115
Purpose of Disbursement Payroll Taxes	Category/Type	
Candidate Name	Amount of Each Disbursement this Period 155.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D597910
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	440.00
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 62 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Williams, Erik, A, Mr.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2016	
Mailing Address 120 Boston Tpke			FEC Identification Number C	
City Coventry	State CT	Zip Code 06238-1350	Amount of Each Disbursement this Period 4245.00	
Purpose of Disbursement Printing		Category/Type	Transaction ID : D596546	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Zamani, Yasmine, , Ms.,			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016	
Mailing Address 7240 Evans Mill Road			FEC Identification Number C	
City McLean	State VA	Zip Code 22101-3422	Amount of Each Disbursement this Period 2107.50	
Purpose of Disbursement Payroll		Category/Type	Transaction ID : D596526	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Zamani, Yasmine, , Ms.,			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2016	
Mailing Address 7240 Evans Mill Road			FEC Identification Number C	
City McLean	State VA	Zip Code 22101-3422	Amount of Each Disbursement this Period 1849.63	
Purpose of Disbursement Payroll		Category/Type	Transaction ID : D597902	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	8202.13
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 63 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Diners Club			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address PO Box 6012			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197-6012	Amount of Each Disbursement this Period 374.00	
Purpose of Disbursement Credit Card Payment		Category/Type	Transaction ID : D596482	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Capital One Bank			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address PO Box 71083			FEC Identification Number C	
City Charlotte	State NC	Zip Code 28272	Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement Credit Card Payment		Category/Type	Transaction ID : D596484	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Hartford Courant			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 285 Broad St			FEC Identification Number C	
City Hartford	State CT	Zip Code 06115-3785	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Print Advertisement		Category/Type	Transaction ID : D596485	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	3374.00
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 64 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. New Haven Register			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 40 Sargent Dr			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-6111	Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement Print Advertisement		Category/ Type	Transaction ID : D597987	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Chase Card Services			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address PO Box 15651			FEC Identification Number C	
City Wilmington	State DE	Zip Code 19886-5651	Amount of Each Disbursement this Period 532.01	
Purpose of Disbursement Credit Card Payment		Category/ Type	Transaction ID : D596487	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Full Moon Rising, Inc.			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016	
Mailing Address 2833 Overbeck Ln			FEC Identification Number C	
City West Chicago	State IL	Zip Code 60185-6181	Amount of Each Disbursement this Period 532.01	
Purpose of Disbursement Event Supplies		Category/ Type	Transaction ID : D596488	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	532.01
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Chase Card Services

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 15651

City: Wilmington State: DE Zip Code: 19886-5651

Purpose of Disbursement: Credit Card Payment

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 590.51

Transaction ID : D596509

Memo Item

B. Chocolate Chocolate

Full Name (Last, First, Middle Initial)
Mailing Address 1130 Connecticut Ave NW

City: Washington State: DC Zip Code: 20036-3904

Purpose of Disbursement: Gifts for Donors

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 131.45

Transaction ID : D596511

Memo Item

C. Columbia Catering

Full Name (Last, First, Middle Initial)
Mailing Address 1090 Vermont Ave NW

City: Washington State: DC Zip Code: 20005-4905

Purpose of Disbursement: Catering

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 10 / 28 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 219.38

Transaction ID : D596510

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 590.51

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 90			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Capital One Bank			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address PO Box 71083			FEC Identification Number C		
City Charlotte	State NC	Zip Code 28272	Amount of Each Disbursement this Period 10022.20		
Purpose of Disbursement Credit Card Payment		Category/Type	Transaction ID : D596560		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Abate' Restaurant			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 129 Wooster St			FEC Identification Number C		
City New Haven	State CT	Zip Code 06511-5709	Amount of Each Disbursement this Period 245.34		
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596565		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 215.10		
Purpose of Disbursement Travel		Category/Type	Transaction ID : D596583		
Candidate Name		Memo Item <input checked="" type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	10022.20
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Archie Moore's Bar & Restaurant			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 122 1/2 Willow Street			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-2641	Amount of Each Disbursement this Period 237.33	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596576	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. AT&T			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address PO Box 5082			FEC Identification Number C	
City Carol Stream	State IL	Zip Code 60197-5082	Amount of Each Disbursement this Period 82.06	
Purpose of Disbursement Phone Bill		Category/Type	Transaction ID : D596590	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Brazi's			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 201 Food Terminal Plz			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-5911	Amount of Each Disbursement this Period 553.02	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596577	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Cafe Amici

Full Name (Last, First, Middle Initial)
Mailing Address 1093 Seven Locks Rd

City Potomac State MD Zip Code 20854-2903

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 2167.79

Transaction ID : D596561

Memo Item

B. Capital One Bank

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 71083

City Charlotte State NC Zip Code 28272

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 55.78

Transaction ID : D596587

Memo Item

C. Carmela's on the Extension

Full Name (Last, First, Middle Initial)
Mailing Address 139 Main St

City Middletown State CT Zip Code 06457-3423

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 529.00

Transaction ID : D596581

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Casey Storage Solutions			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 785 Sherman Avenue			FEC Identification Number C	
City Hamden	State CT	Zip Code 06514	Amount of Each Disbursement this Period 132.94	
Purpose of Disbursement Storage Space Rental		Category/Type	Transaction ID : D596588	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Columbia Florist Gallery, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 534 23rd St NW			FEC Identification Number C	
City Washington	State DC	Zip Code 20037-2824	Amount of Each Disbursement this Period 112.56	
Purpose of Disbursement Flowers		Category/Type	Transaction ID : D596571	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Connecticut Limousine			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 80 Middletown Ave			FEC Identification Number C	
City New Haven	State CT	Zip Code 06513	Amount of Each Disbursement this Period 400.00	
Purpose of Disbursement Travel		Category/Type	Transaction ID : D596580	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. Dunkin Donuts

Full Name (Last, First, Middle Initial)
Mailing Address 801 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-2167

Purpose of Disbursement Catering

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 13.60

Transaction ID : D596582

Memo Item

B. GoDaddy.com

Full Name (Last, First, Middle Initial)
Mailing Address 14455 N Hayden Road Suite 219

City Scottsdale State AZ Zip Code 85260-6993

Purpose of Disbursement Website Hosting

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 8.07

Transaction ID : D596589

Memo Item

C. Intuit

Full Name (Last, First, Middle Initial)
Mailing Address 2632 Marine Way

City Mountain View State CA Zip Code 94043-1126

Purpose of Disbursement Payroll Processing Software License

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 11 / 08 / 2016

FEC Identification Number: C

Amount of Each Disbursement this Period: 570.65

Transaction ID : D596591

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Nataz			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 2025 Foxon Rd			FEC Identification Number C	
City North Branford	State CT	Zip Code 06471	Amount of Each Disbursement this Period 1105.56	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596567	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Nica's Market			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 603 Orange Street			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-3826	Amount of Each Disbursement this Period 241.10	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596564	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Potbelly Sandwich Shop			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 222 Merchandise Mart Plaza			FEC Identification Number C	
City Chicago	State IL	Zip Code 60654	Amount of Each Disbursement this Period 117.32	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596584	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Sierra Club Political Cmte			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 85 SECOND STREET 2ND FLR.			FEC Identification Number C C00135368	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 284.33	
Purpose of Disbursement List Rental		Category/ Type	Transaction ID : D596569	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Staples			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 500 Staples Drive			FEC Identification Number C	
City Framingham	State MA	Zip Code 01702-4478	Amount of Each Disbursement this Period 551.12	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : D596562	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Stop & Shop			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 450 Elm St			FEC Identification Number C	
City West Haven	State CT	Zip Code 06516	Amount of Each Disbursement this Period 21.25	
Purpose of Disbursement Office Supplies		Category/ Type	Transaction ID : D596570	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 73 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. The Greek Olive Restaurant			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 42 Sargent Dr			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511	Amount of Each Disbursement this Period 1010.17	
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596578	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. United States Postal Service USPS			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address Brewery St			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511	Amount of Each Disbursement this Period 470.00	
Purpose of Disbursement Shipping		Category/Type	Transaction ID : D596563	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Walgreens			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 1191 Dixwell Avenue			FEC Identification Number C	
City Hamden	State CT	Zip Code 06514-4733	Amount of Each Disbursement this Period 45.27	
Purpose of Disbursement Office Supplies		Category/Type	Transaction ID : D596568	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 90			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Wine Thief			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016		
Mailing Address 181 Crown St			FEC Identification Number C		
City New Haven	State CT	Zip Code 06510-3005	Amount of Each Disbursement this Period 331.18		
Purpose of Disbursement Catering		Category/Type	Transaction ID : D596575		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. Chase Card Services			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016		
Mailing Address PO Box 15651			FEC Identification Number C		
City Wilmington	State DE	Zip Code 19886-5651	Amount of Each Disbursement this Period 462.73		
Purpose of Disbursement Credit Card Payment		Category/Type	Transaction ID : D597687		
Candidate Name		<input type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. American Airlines			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016		
Mailing Address 4333 Amon Carter Blvd			FEC Identification Number C		
City Fort Worth	State TX	Zip Code 76155-2605	Amount of Each Disbursement this Period 157.20		
Purpose of Disbursement Travel		Category/Type	Transaction ID : D597966		
Candidate Name		<input checked="" type="checkbox"/> Memo Item			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	462.73
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Hertz Rental Car			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016	
Mailing Address 225 Brae Boulevard			FEC Identification Number C	
City Park Ridge	State NJ	Zip Code 07656	Amount of Each Disbursement this Period 98.53	
Purpose of Disbursement Travel		Category/ Type	Transaction ID : D597690	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. New Haven Hotel			Date of Disbursement M M / D D / Y Y Y Y 11 / 17 / 2016	
Mailing Address 229 George St			FEC Identification Number C	
City New Haven	State CT	Zip Code 06510-3200	Amount of Each Disbursement this Period 207.00	
Purpose of Disbursement Lodging		Category/ Type	Transaction ID : D597689	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) c. Capital One Bank			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address PO Box 71083			FEC Identification Number C	
City Charlotte	State NC	Zip Code 28272	Amount of Each Disbursement this Period 2538.32	
Purpose of Disbursement Credit Card Payment		Category/ Type	Transaction ID : D597702	
Candidate Name		<input type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2538.32
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Abate' Restaurant			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 129 Wooster St			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-5709	Amount of Each Disbursement this Period 240.03	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597704	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Archie Moore's Bar & Restaurant			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 122 1/2 Willow Street			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-2641	Amount of Each Disbursement this Period 40.00	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597703	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Dunkin Donuts			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 801 Pennsylvania Ave SE			FEC Identification Number C	
City Washington	State DC	Zip Code 20003-2167	Amount of Each Disbursement this Period 92.73	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597967	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Facebook, Inc.			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 15 Hacker Way			FEC Identification Number C	
City Menlo Park	State CA	Zip Code 94025-1455	Amount of Each Disbursement this Period 635.00	
Purpose of Disbursement Online Advertisement		Category/ Type	Transaction ID : D597705	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. Nica's Market			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 603 Orange Street			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-3826	Amount of Each Disbursement this Period 796.24	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597969	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Nica's Market			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016	
Mailing Address 603 Orange Street			FEC Identification Number C	
City New Haven	State CT	Zip Code 06511-3826	Amount of Each Disbursement this Period 176.22	
Purpose of Disbursement Catering		Category/ Type	Transaction ID : D597973	
Candidate Name		<input checked="" type="checkbox"/> Memo Item		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 90	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. Only the Best Pizza		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2016
Mailing Address 209 Campbell Ave		FEC Identification Number C
City West Haven	State CT	Zip Code 06516
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period 230.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D597971 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	84371.20

**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 79 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial)
A. ANGIE CRAIG FOR CONGRESS

Mailing Address PO BOX 22116

City EAGAN State MN Zip Code 55122

Purpose of Disbursement Contribution

Candidate Name **CRAIG, ANGELA DAWN, , ,** Category/Type

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: MN District: 02

Date of Disbursement: 10 / 21 / 2016

FEC Identification Number: **C** C00575209

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596489**

Memo Item

Full Name (Last, First, Middle Initial)
B. BRYAN CAFORIO FOR CONGRESS

Mailing Address 24307 Magic Mountain Pkwy # 548

City Valencia State CA Zip Code 91355-3402

Purpose of Disbursement Contribution

Candidate Name **CAFORIO, BRYAN, , ,** Category/Type

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: CA District: 25

Date of Disbursement: 11 / 01 / 2016

FEC Identification Number: **C** C00597724

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596538**

Memo Item

Full Name (Last, First, Middle Initial)
C. CAIN FOR CONGRESS

Mailing Address P.O. BOX 1523

City BANGOR State ME Zip Code 04402

Purpose of Disbursement Contribution

Candidate Name **CAIN, EMILY ANN, , ,** Category/Type

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify) ▼

State: ME District: 02

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: **C** C00546077

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596525**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3000.00

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 80 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. CAROL SHEA-PORTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO BOX 453		FEC Identification Number C C00419978
City ROCHESTER	State NH	Zip Code 03866
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SHEA-PORTER, CAROL, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596520
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. CAROL SHEA-PORTER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO BOX 453		FEC Identification Number C C00419978
City ROCHESTER	State NH	Zip Code 03866
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SHEA-PORTER, CAROL, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596498
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. CHARLIE CRIST FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO BOX 1547		FEC Identification Number C C00590067
City ST. PETERSBURG	State FL	Zip Code 33731
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name CRIST, CHARLIE JOSEPH, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596490
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: FL District: 13	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 81 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. DARREN SOTO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address 338 N Magnolia Ave Ste D		FEC Identification Number C 00581074
City Orlando	State FL	Zip Code 32801-1639
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name SOTO, DARREN, , ,	Category/ Type	Transaction ID : D596536
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 09		

Full Name (Last, First, Middle Initial) B. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2016
Mailing Address 430 S Capitol Street SE		FEC Identification Number C
City Washington	State DC	Zip Code 20003-4024
Purpose of Disbursement Unlimited Transfer		Amount of Each Disbursement this Period 25000.00
Candidate Name	Category/ Type	Transaction ID : D596508
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. DENISE JUNEAU FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 563		FEC Identification Number C 00591289
City Helena	State MT	Zip Code 59624-0563
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name JUNEAU, DENISE, , ,	Category/ Type	Transaction ID : D596517
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MT District: 01		

SUBTOTAL of Disbursements This Page (optional).....▶	27000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. GAIL SCHWARTZ FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO BOX 1209		FEC Identification Number C 000614073
City CRESTED BUTTE	State CO	Zip Code 81224
Purpose of Disbursement Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name SCHWARTZ, GAIL SHERIDAN MS., , ,	Category/ Type	Transaction ID : D596519
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CO District: 03		

Full Name (Last, First, Middle Initial) B. GRETCHEN DRISKELL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 464		FEC Identification Number C 000572859
City Saline	State MI	Zip Code 48176-0464
Purpose of Disbursement Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name DRISKELL, GRETCHEN, , ,	Category/ Type	Transaction ID : D596516
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MI District: 07		

Full Name (Last, First, Middle Initial) C. JOE GARCIA FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO BOX 330871		FEC Identification Number C 000521781
City MIAMI	State FL	Zip Code 33233
Purpose of Disbursement Contribution	<input type="checkbox"/>	Amount of Each Disbursement this Period 1000.00
Candidate Name GARCIA, JOE, , ,	Category/ Type	Transaction ID : D596542
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 26		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 83 OF 90
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. JOSH GOTTHEIMER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO Box 584		FEC Identification Number C C00573949
City Ridgewood	State NJ	Zip Code 07451-0584
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name GOTTHEIMER, JOSH, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596543
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. JOSH GOTTHEIMER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO Box 584		FEC Identification Number C C00573949
City Ridgewood	State NJ	Zip Code 07451-0584
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name GOTTHEIMER, JOSH, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596491
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 05	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. LUANN BENNETT FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO Box 446		FEC Identification Number C C00595116
City McLean	State VA	Zip Code 22101-0446
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name BENNETT, LUANN, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596540
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 10	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 84 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. LUANN BENNETT FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 446		FEC Identification Number C C00595116
City McLean	State VA	Zip Code 22101-0446
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name BENNETT, LUANN, , ,	Category/ Type	Transaction ID : D596514
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: VA District: 10		

Full Name (Last, First, Middle Initial) B. MCEACHIN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO Box 8092		FEC Identification Number C C00610964
City Richmond	State VA	Zip Code 23223-0092
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MCEACHIN, ASTON DONALD MR., , ,	Category/ Type	Transaction ID : D596492
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: VA District: 04		

Full Name (Last, First, Middle Initial) C. MONICA VERNON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO BOX 1635		FEC Identification Number C C00571562
City CEDAR RAPIDS	State IA	Zip Code 52406
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name VERNON, MONICA W, , ,	Category/ Type	Transaction ID : D596523
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: IA District: 01		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 85 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1041

City BRAINERD State MN Zip Code 56401

Purpose of Disbursement Contribution

Candidate Name
NOLAN, RICHARD MICHAEL, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: MN District: 08

Date of Disbursement: 10 / 21 / 2016

FEC Identification Number: **C** C00499053

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596494**

Memo Item

B. ROSEN FOR NEVADA

Full Name (Last, First, Middle Initial)
Mailing Address 1000 N. GREEN VALLEY PKWY #440-177

City HENDERSON State NV Zip Code 89074

Purpose of Disbursement Contribution

Candidate Name
ROSEN, JACKY, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NV District: 03

Date of Disbursement: 10 / 21 / 2016

FEC Identification Number: **C** C00606939

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596496**

Memo Item

C. RUBEN KIHUEN FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 458

City LAS VEGAS State NV Zip Code 89125

Purpose of Disbursement Contribution

Candidate Name
KIHUEN, RUBEN, , ,

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify) ▼

State: NV District: 04

Date of Disbursement: 10 / 31 / 2016

FEC Identification Number: **C** C00502773

Amount of Each Disbursement this Period: 1000.00

Transaction ID : **D596518**

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 3000.00

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 86 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. SALUD CARBAJAL FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO BOX 1290		FEC Identification Number C C00576041
City SANTA BARBARA	State CA	Zip Code 93102
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name CARBAJAL, SALUD, , ,		Transaction ID : D596515
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 24		

Full Name (Last, First, Middle Initial) B. SANTARSIERO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address PO Box 249		FEC Identification Number C C00571455
City Newtown	State PA	Zip Code 18940-0249
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name SANTARSIERO, STEVEN J, , ,		Transaction ID : D596524
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 08		

Full Name (Last, First, Middle Initial) C. SANTARSIERO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO Box 249		FEC Identification Number C C00571455
City Newtown	State PA	Zip Code 18940-0249
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name SANTARSIERO, STEVEN J, , ,		Transaction ID : D596541
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: PA District: 08		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 87 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. SCHNEIDER FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO BOX 1318		FEC Identification Number C 00495952
City DEERFIELD	State IL	Zip Code 60015
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SCHNEIDER, BRADLEY SCOTT, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596497
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 10	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. SHELLI YODER FOR INDIANA		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO BOX 6654		FEC Identification Number C 00583427
City BLOOMINGTON	State IN	Zip Code 47407
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name YODER, SHELLI, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596500
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 09	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. SHELLI YODER FOR INDIANA		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO BOX 6654		FEC Identification Number C 00583427
City BLOOMINGTON	State IN	Zip Code 47407
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name YODER, SHELLI, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596535
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IN District: 09	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 88 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. STEPHANIE MURPHY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address PO Box 205		FEC Identification Number C C00620443
City Winter Park	State FL	Zip Code 32790-0205
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MURPHY, STEPHANIE, , ,	Category/ Type	Transaction ID : D596537
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 07		

Full Name (Last, First, Middle Initial) B. STEPHANIE MURPHY FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO Box 205		FEC Identification Number C C00620443
City Winter Park	State FL	Zip Code 32790-0205
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name MURPHY, STEPHANIE, , ,	Category/ Type	Transaction ID : D596493
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: FL District: 07		

Full Name (Last, First, Middle Initial) C. SUOZZI 2016		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address 410 Jericho Tpke Ste 200		FEC Identification Number C C00607200
City Jericho	State NY	Zip Code 11753-1318
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period 1000.00
Candidate Name SUOZZI, THOMAS MR, , ,	Category/ Type	Transaction ID : D596499
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NY District: 03		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 89 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. SUOZZI 2016		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016
Mailing Address 410 Jericho Tpke Ste 200		FEC Identification Number C C00607200
City Jericho	State NY	Zip Code 11753-1318
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name SUOZZI, THOMAS MR, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596521
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 03	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. TEXANS FOR PETE		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2016
Mailing Address 10715 Gulfdale St Ste 235		FEC Identification Number C C00575043
City San Antonio	State TX	Zip Code 78216-3666
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name GALLEGO, PETE, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596539
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: TX District: 23	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. TOM O'HALLERAN FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2016
Mailing Address PO BOX 20375		FEC Identification Number C C00582890
City SEDONA	State AZ	Zip Code 86341
Purpose of Disbursement Contribution	Category/ Type	Amount of Each Disbursement this Period 1000.00
Candidate Name O'HALLERAN, TOM, , ,	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : D596495
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 01	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
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 90 OF 90	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Rosa DeLauro

Full Name (Last, First, Middle Initial) A. ZEPHYR TEACHOUT FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2016	
Mailing Address PO Box 491			FEC Identification Number C C00608174	
City Rosendale	State NY	Zip Code 12472-0491	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement Contribution		Category/ Type	Transaction ID : D596522	
Candidate Name TEACHOUT, ZEPHYR, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 19				

Full Name (Last, First, Middle Initial) B.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C.			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			FEC Identification Number C	
City	State	Zip Code	Amount of Each Disbursement this Period	
Purpose of Disbursement		Category/ Type	Memo Item <input type="checkbox"/>	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	58000.00