

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SENATE
FEB -1 PM 1:18

Office Use Only

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

Friends of Bernie Sanders

ADDRESS (number and street)

P.O. Box 391

☒ Check if different than previously reported. (ACC)

Burlington

VT

05402

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00411330

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

VT

00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☒

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the State of

5. Covering Period

10

01

2007

through

12

31

2007

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

Type or Print Name of Treasurer

Martha Abbott

Signature of Treasurer

Electronically Filed by Martha Abbott

Date

01

25

2008

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

Office
Use
Only

FEC FORM 3
(Revised 02/2003)

FE5AN018

28020052200

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Bernie Sanders

Report Covering the Period:

From:

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

To:

M M D D Y Y Y Y
1 2 3 1 2 0 0 7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	1005.60	46286.13
(b) Total Contribution Refunds (from Line 20(d)).....	35.00	3128.21
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	970.60	43157.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	16148.52	575277.77
(b) Total Offsets to Operating Expenditures (from Line 14).....	172.69	89886.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	15975.83	485391.02
8. Cash on Hand at Close of Reporting Period (from Line 27).....	73307.62	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name
Friends of Bernie Sanders

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	250.00	8550.00
(i) Itemized (use Schedule A).....	255.60	25844.49
(ii) Unitemized.....	505.60	34394.49
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	500.00	11891.64
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	1005.60	46286.13
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	172.69	89886.75
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1182.53
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1178.29	137355.41

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A **Total This Period**

COLUMN B **Election Cycle-to-Date**

17. OPERATING EXPENDITURES.....

16148.52

575277.77

18. TRANSFERS TO OTHER
AUTHORIZED COMMITTEES.....

0.00

0.00

19. LOAN REPAYMENTS:

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

0.00

0.00

(b) Of all Other Loans.....

0.00

0.00

(c) TOTAL LOAN REPAYMENTS
(add Lines 19(a) and (b)).....

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other
Than Political Committees.....

0.00

1484.70

(b) Political Party Committees.....

35.00

1643.51

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

0.00

0.00

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

35.00

3128.21

21. OTHER DISBURSEMENTS.....

0.00

105.85

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

16183.52

578511.83

III. CASH SUMMARY

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

88312.85

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

1178.29

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

89491.14

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

16183.52

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

73307.62

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Elizabeth Malone

Mailing Address 3523 N Murray Ave

City

Milwaukee

State

WI

Zip Code

53211

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C1852085

Amount of Each Receipt this Period

250.00

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

SUBTOTAL of Receipts This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Drive Committee, Teamsters PAC

Mailing Address 25 Louisiana Ave, NW

City

Washington

State

DC

Zip Code

20001

FEC ID number of contributing
federal political committee.

C C00032979

Name of Employer

Occupation

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
10 / 09 / 2007

Transaction ID: C1852091

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional) ▶

500.00

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

500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 33

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

American List Council

Mailing Address 16 W 22nd St

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

17750.00

Date of Receipt

MM / DD / YYYY
10 / 09 / 2007

Transaction ID: C1852090

Amount of Each Receipt this Period

91.50

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

B.

Full Name (Last, First, Middle Initial)

American List Council

Mailing Address 16 W 22nd St

City

New York

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

17750.00

Date of Receipt

MM / DD / YYYY
12 / 04 / 2007

Transaction ID: C1852100

Amount of Each Receipt this Period

81.19

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

SUBTOTAL of Receipts This Page (optional)

172.69

TOTAL This Period (last page this line number only)

172.69

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

American Legion Post 14

Transaction ID: D143168

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2007

Mailing Address 100 Armory Lane Vergennes, VT

City State Zip Code
Vergennes VT 05491

Amount of Each Disbursement this Period

1144.50

Purpose of Disbursement

Catering

☐

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

B.

Full Name (Last, First, Middle Initial)

Bove's

Transaction ID: D143146

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2007

Mailing Address 68 Pearl Street

City State Zip Code
Burlington VT 05401

Amount of Each Disbursement this Period

499.50

Purpose of Disbursement

Catering

☐

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Cheese Outlet

Transaction ID: D143150

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2007

Mailing Address 400 Pine St.

City State Zip Code
Burl VT 05401

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement

Catering

☐

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

1894.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A.

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

Transaction ID: D143104
 Date of Disbursement

Mailing Address 2 Bank Street

10 / 31 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Bank Service Charges

37.95

Candidate Name

Category/
 Type

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

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

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

B.

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

Transaction ID: D143105
 Date of Disbursement

Mailing Address 2 Bank Street

10 / 31 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Credit card charges

70.99

Candidate Name

Category/
 Type

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

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

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

C.

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

Transaction ID: D143106
 Date of Disbursement

Mailing Address 2 Bank Street

11 / 30 / 2007

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Bank Service Charges

5.95

Candidate Name

Category/
 Type

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

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

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

SUBTOTAL of Disbursements This Page (optional) ▶

114.89

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
Friends of Bernie Sanders

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

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Bank Service Charges

Candidate Name

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

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

Transaction ID: D143107
Date of Disbursement
MM / DD / YYYY
11 / 30 / 2007

Amount of Each Disbursement this Period
70.99

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

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

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Bank Service Charges

Candidate Name

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

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

Transaction ID: D143108
Date of Disbursement
MM / DD / YYYY
12 / 31 / 2007

Amount of Each Disbursement this Period
5.95

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

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

Mailing Address 2 Bank Street

City Burlington State VT Zip Code 05401

Purpose of Disbursement
Bank Service Charges

Candidate Name

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

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

Transaction ID: D143109
Date of Disbursement
MM / DD / YYYY
12 / 31 / 2007

Amount of Each Disbursement this Period
70.99

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

SUBTOTAL of Disbursements This Page (optional) ►

147.93

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

28020052217

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chittenden Bank</p> <p>Mailing Address 2 Bank Street</p> <p>City Burlington State VT Zip Code 05401</p> <p>Purpose of Disbursement Office Exp. (Gen. Camp. Exp.)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143110</p> <p>Date of Disbursement MM / DD / YYYY 12 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 56.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crystal Rock Bottled Water</p> <p>Mailing Address 1050 Buckingham St.</p> <p>City Watertown State CT Zip Code 06795</p> <p>Purpose of Disbursement Meals for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143138</p> <p>Date of Disbursement MM / DD / YYYY 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 10.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crystal Rock Bottled Water</p> <p>Mailing Address 1050 Buckingham St.</p> <p>City Watertown State CT Zip Code 06795</p> <p>Purpose of Disbursement Meals for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143139</p> <p>Date of Disbursement MM / DD / YYYY 11 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 24.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ►</p> <p>TOTAL This Period (last page this line number only) ►</p>	

91.84

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

<p>A. Full Name (Last, First, Middle Initial) Easy Self Storage</p> <p>Mailing Address 35 Swift St</p> <p>City South Burlington State VT Zip Code 05403-7306</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143101</p> <p>Date of Disbursement 11 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 194.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Easy Self Storage</p> <p>Mailing Address 35 Swift St</p> <p>City South Burlington State VT Zip Code 05403-7306</p> <p>Purpose of Disbursement Storage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143102</p> <p>Date of Disbursement 12 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 97.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) FEDEX</p> <p>Mailing Address 3875 Airways Blvd</p> <p>City Memphis State TN Zip Code 38116-5070</p> <p>Purpose of Disbursement Messenger-FedEx</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D143151</p> <p>Date of Disbursement 11 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 21.09</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>SUBTOTAL of Disbursements This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶</p>	

312.09

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 33

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

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NAME OF COMMITTEE (In Full)
Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) FEDEX	Transaction ID: D143152 Date of Disbursement
Mailing Address 3875 Airways Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>12 / 04 / 2007</div> </div>
City Memphis State TN Zip Code 38116-5070	Amount of Each Disbursement this Period
Purpose of Disbursement Messenger-FedEx	<div> <div>2007</div> <div>13.98</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) First Step Printing	Transaction ID: D143140 Date of Disbursement
Mailing Address PO Box 311	<div> <div>M M / D D / Y Y Y Y</div> <div>10 / 09 / 2007</div> </div>
City Underhill State VT Zip Code 05489	Amount of Each Disbursement this Period
Purpose of Disbursement Printing (Fundraising)	<div> <div>2007</div> <div>265.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Holiday Inn	Transaction ID: D143160 Date of Disbursement
Mailing Address Park Street	<div> <div>M M / D D / Y Y Y Y</div> <div>12 / 02 / 2007</div> </div>
City New York State NY Zip Code	Amount of Each Disbursement this Period
Purpose of Disbursement Catering	<div> <div>2007</div> <div>1927.56</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div> <div>2206.54</div> </div>
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders .

A.	Full Name (Last, First, Middle Initial) Leighton, Whitney	Transaction ID: D143173 Date of Disbursement																				
	Mailing Address 68 Main St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	9	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	2	9	/	2	0	0	7													
	City Bowdoinham State ME Zip Code 04008	Amount of Each Disbursement this Period 193.93																				
	Purpose of Disbursement Net Wages Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
B.	Full Name (Last, First, Middle Initial) Montpelier Elks Lodge	Transaction ID: D143183 Date of Disbursement																				
	Mailing Address	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	7	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	7	/	2	0	0	7													
	City Montpelier State VT Zip Code 05602	Amount of Each Disbursement this Period 2500.00																				
	Purpose of Disbursement Sponsorship Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
C.	Full Name (Last, First, Middle Initial) NGP	Transaction ID: D143141 Date of Disbursement																				
	Mailing Address 5505 Connecticut Ave NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	8	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	8	/	2	0	0	7													
	City Washington State DC Zip Code 20015	Amount of Each Disbursement this Period 60.00																				
	Purpose of Disbursement Software Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
	SUBTOTAL of Disbursements This Page (optional)	2753.93																				
	TOTAL This Period (last page this line number only)																					

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

NGP

Transaction ID: D143142

Date of Disbursement

12 / 04 / 2007

Mailing Address 5505 Connecticut Ave NW

City Washington State DC Zip Code 20015

Purpose of Disbursement

Software

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

900.00

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

B.

Full Name (Last, First, Middle Initial)

jessica oski

Transaction ID: D143167

Date of Disbursement

10 / 09 / 2007

Mailing Address

City burlington State VT Zip Code 05401

Purpose of Disbursement

Catering

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

553.02

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Phil Fiermonte

Transaction ID: D143176

Date of Disbursement

11 / 29 / 2007

Mailing Address 107 Lafountain St.

City Burlington State VT Zip Code 05401

Purpose of Disbursement

TRAVEL

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

23.99

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

1477.01

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)

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) Dexter Randall	Transaction ID: D143100 Date of Disbursement
Mailing Address 627 Bonneau Rd	<div> <div>M</div><div>M</div><div>/</div> <div>D</div><div>D</div><div>/</div> <div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>1</div><div>1</div> <div>0</div><div>1</div> <div>2</div><div>0</div><div>0</div><div>7</div> </div>
City North Troy State VT Zip Code 05859-9388	Amount of Each Disbursement this Period
Purpose of Disbursement Catering	<div>1306.07</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Sovernet	Transaction ID: D143125 Date of Disbursement
Mailing Address 276 E Allen St	<div> <div>M</div><div>M</div><div>/</div> <div>D</div><div>D</div><div>/</div> <div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>1</div><div>0</div> <div>0</div><div>9</div> <div>2</div><div>0</div><div>0</div><div>7</div> </div>
City Winooski State VT Zip Code 05404-1570	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div>123.12</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sovernet	Transaction ID: D143126 Date of Disbursement
Mailing Address 276 E Allen St	<div> <div>M</div><div>M</div><div>/</div> <div>D</div><div>D</div><div>/</div> <div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div><div>Y</div> </div> <div> <div>1</div><div>1</div> <div>0</div><div>8</div> <div>2</div><div>0</div><div>0</div><div>7</div> </div>
City Winooski State VT Zip Code 05404-1570	Amount of Each Disbursement this Period
Purpose of Disbursement Telephone	<div>123.52</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	<div>1552.71</div>
TOTAL This Period (last page this line number only)	

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

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

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(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Sovernet

Transaction ID: D143127

Date of Disbursement

12 / 04 / 2007

Mailing Address 276 E Allen St

City

Winooski

State

VT

Zip Code

05404-1570

Amount of Each Disbursement this Period

122.98

Purpose of Disbursement

Telephone

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

B.

Full Name (Last, First, Middle Initial)

St. Albans Historical Society

Transaction ID: D143165

Date of Disbursement

10 / 10 / 2007

Mailing Address Box 722

City

St. Albans

State

VT

Zip Code

05478

Amount of Each Disbursement this Period

230.00

Purpose of Disbursement

Rental

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

C.

Full Name (Last, First, Middle Initial)

The Bookkeeping Center

Transaction ID: D143128

Date of Disbursement

10 / 23 / 2007

Mailing Address 1 Mill St

Ste 140

City

Burlington

State

VT

Zip Code

05401-1533

Amount of Each Disbursement this Period

332.50

Purpose of Disbursement

Accounting Services

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

State:

District:

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

SUBTOTAL of Disbursements This Page (optional)

685.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

The Mailing Center

Transaction ID: D143143

Date of Disbursement

Mailing Address 996 Rd

10 / 09 / 2007

City State Zip Code
 East Barre VT 05649

Amount of Each Disbursement this Period

Purpose of Disbursement
 Printing (Field)

101.60

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D143130

Date of Disbursement

Mailing Address PO Box 17120

10 / 09 / 2007

City State Zip Code
 Tucson AZ 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
 Mobile Phone

130.50

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D143131

Date of Disbursement

Mailing Address PO Box 17120

10 / 09 / 2007

City State Zip Code
 Tucson AZ 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
 Mobile Phone

85.81

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

317.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
 Verizon Wireless

Transaction ID: D143132
 Date of Disbursement

Mailing Address PO Box 17120

11 / 08 / 2007

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
 Mobile Phone

80.81

Candidate Name

Category/
 Type

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

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

State: District:

B.

Full Name (Last, First, Middle Initial)
 Verizon Wireless

Transaction ID: D143133
 Date of Disbursement

Mailing Address PO Box 17120

11 / 08 / 2007

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
 Mobile Phone

91.54

Candidate Name

Category/
 Type

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

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

State: District:

C.

Full Name (Last, First, Middle Initial)
 Verizon Wireless

Transaction ID: D143134
 Date of Disbursement

Mailing Address PO Box 17120

11 / 08 / 2007

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

Purpose of Disbursement
 Mobile Phone

91.54

Candidate Name

Category/
 Type

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

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

State: District:

SUBTOTAL of Disbursements This Page (optional)

263.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D143135

Date of Disbursement

12 / 10 / 2007

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

80.85

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

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

B.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D143136

Date of Disbursement

12 / 10 / 2007

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

125.23

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

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

C.

Full Name (Last, First, Middle Initial)

Verizon Wireless

Transaction ID: D143137

Date of Disbursement

12 / 10 / 2007

Mailing Address PO Box 17120

City Tucson State AZ Zip Code 85731-7120

Amount of Each Disbursement this Period

91.54

Purpose of Disbursement

Mobile Phone

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

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

SUBTOTAL of Disbursements This Page (optional) ▶

297.62

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (in Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Verizon

Transaction ID: D143124

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2007

Mailing Address PO Box 15123

City Albany State NY Zip Code 12212-5123

Amount of Each Disbursement this Period

125.56

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

B.

Full Name (Last, First, Middle Initial)

Credit Card Services

Transaction ID: D143112

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2007

Mailing Address PO Box 405

City Burlington State VT Zip Code 05402-0405

Amount of Each Disbursement this Period

1159.78

Purpose of Disbursement
Credit Card Services

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

C.

Full Name (Last, First, Middle Initial)

Active Host

Transaction ID: D143147

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2007

Mailing Address 22 N College St.

City Schenectady State NY Zip Code 12305

Amount of Each Disbursement this Period

509.85

Purpose of Disbursement
Internet Access

Candidate Name

Category/
Type

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

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1285.34

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

Friends of Bernie Sanders

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

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143113

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

15.30

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

[MEMO ITEM]

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

Mirabelles Cafe

Mailing Address 198 Main St. Burlington VT

City
Burlington

State
VT

Zip Code
05401

Purpose of Disbursement
Hospitality Refreshments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143161

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

289.59

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

[MEMO ITEM]

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

Network Solutions

Mailing Address 4014 Gunn Highway, Suite 260

City
Tampa

State
FL

Zip Code
33618

Purpose of Disbursement
Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143162

Date of Disbursement

11 / 08 / 2007

Amount of Each Disbursement this Period

44.95

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

A.	Full Name (Last, First, Middle Initial) USPO	Transaction ID: D143144 Date of Disbursement
	Mailing Address Elmwood Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>11 / 08 / 2007</div> </div>
	City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period 24.00
	<div> <div>Purpose of Disbursement Postage (Gen. Camp. Exp.)</div> <div>Candidate Name</div> <div>Category/Type</div> </div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Credit Card Services	Transaction ID: D143114 Date of Disbursement
	Mailing Address PO Box 405	<div> <div>M M / D D / Y Y Y Y</div> <div>12 / 04 / 2007</div> </div>
	City Burlington State VT Zip Code 05402-0405	Amount of Each Disbursement this Period 394.16
	<div> <div>Purpose of Disbursement Credit Card Services</div> <div>Candidate Name</div> <div>Category/Type</div> </div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	
C.	Full Name (Last, First, Middle Initial) Cash Vault	Transaction ID: D143182 Date of Disbursement
	Mailing Address	<div> <div>M M / D D / Y Y Y Y</div> <div>12 / 04 / 2007</div> </div>
	City Washington State DC Zip Code	Amount of Each Disbursement this Period 51.75
	<div> <div>Purpose of Disbursement Safety deposit box</div> <div>Candidate Name</div> <div>Category/Type</div> </div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	<div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	[MEMO ITEM]
<div> <div>SUBTOTAL of Disbursements This Page (optional) ▶</div> <div>TOTAL This Period (last page this line number only) ▶</div> </div>		<div>394.16</div>

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143117

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

29.52

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143118

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

2.15

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

LaLoma Restaurant

Mailing Address

City
Washington

State
DC

Zip Code

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143178

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

226.75

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement
Credit Card Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143115

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

1192.20

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

B.

Full Name (Last, First, Middle Initial)

Active Host

Mailing Address 22 N College St.

City
Schenectady

State
NY

Zip Code
12305

Purpose of Disbursement
Internet Access

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143148

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

169.95

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Active Host

Mailing Address 22 N College St.

City
Schenectady

State
NY

Zip Code
12305

Purpose of Disbursement
Internet Access

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143149

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

169.95

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1192.20

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A. Full Name (Last, First, Middle Initial) City Market	Transaction ID: D143129 Date of Disbursement
Mailing Address N. Winooski Ave.	<div> <div>12</div> <div>04</div> <div>2007</div> </div>
City Burlington State VT Zip Code 05401	Amount of Each Disbursement this Period
Purpose of Disbursement Hospitality Refreshments	<div>18.68</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type [MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Credit Card Services	Transaction ID: D143123 Date of Disbursement
Mailing Address PO Box 405	<div> <div>12</div> <div>04</div> <div>2007</div> </div>
City Burlington State VT Zip Code 05402-0405	Amount of Each Disbursement this Period
Purpose of Disbursement Credit card charges	<div>73.00</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type [MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Credit Card Services	Transaction ID: D143119 Date of Disbursement
Mailing Address PO Box 405	<div> <div>12</div> <div>04</div> <div>2007</div> </div>
City Burlington State VT Zip Code 05402-0405	Amount of Each Disbursement this Period
Purpose of Disbursement Credit card charges	<div>42.66</div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Category/Type [MEMO ITEM]
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)	<div>0.00</div>
TOTAL This Period (last page this line number only)	

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Credit Card Services

Mailing Address PO Box 405

City
Burlington

State
VT

Zip Code
05402-0405

Purpose of Disbursement
Credit card charges

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143120

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

13.80

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Network Solutions

Mailing Address 4014 Gunn Highway, Suite 260

City
Tampa

State
FL

Zip Code
33618

Purpose of Disbursement
Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143163

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

44.95

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Network Solutions

Mailing Address 4014 Gunn Highway, Suite 260

City
Tampa

State
FL

Zip Code
33618

Purpose of Disbursement
Consultant

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D143164

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

44.95

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Price Chopper

Transaction ID: D143153

Date of Disbursement

12 / 04 / 2007

Mailing Address Shelburne Rd Shopping Plaza

City State Zip Code
 So. Burl VT 05403

Purpose of Disbursement
 Hospitality Refreshments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Amount of Each Disbursement this Period

221.94

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Shaw's

Transaction ID: D143154

Date of Disbursement

12 / 04 / 2007

Mailing Address Shelburne Rd Shopping PLaza

City State Zip Code
 So. Burlington VT 05403

Purpose of Disbursement
 Hospitality Refreshments

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Amount of Each Disbursement this Period

90.82

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Staples

Transaction ID: D143111

Date of Disbursement

12 / 04 / 2007

Mailing Address 861 Williston Rd

City State Zip Code
 South Burlington VT 05403-5724

Purpose of Disbursement
 Office Supplies

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Amount of Each Disbursement this Period

69.50

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)
USPO

Transaction ID: D143145

Date of Disbursement

12 / 04 / 2007

Mailing Address Elmwood Avenue

City Burlington State VT Zip Code 05401

Amount of Each Disbursement this Period

82.00

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

Category/
Type

Candidate Name

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

[MEMO ITEM]

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

B.

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

Transaction ID: D143116

Date of Disbursement

12 / 04 / 2007

Mailing Address PO Box 405

City Burlington State VT Zip Code 05402-0405

Amount of Each Disbursement this Period

490.28

Purpose of Disbursement
Credit Card Services

Category/
Type

Candidate Name

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

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

C.

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

Transaction ID: D143121

Date of Disbursement

12 / 04 / 2007

Mailing Address PO Box 405

City Burlington State VT Zip Code 05402-0405

Amount of Each Disbursement this Period

30.20

Purpose of Disbursement
Credit card charges

Category/
Type

Candidate Name

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

[MEMO ITEM]

Office Sought: ☐ House ☐ Senate ☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

490.28

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

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Credit Card Services

Transaction ID: D143122

Date of Disbursement

Mailing Address PO Box 405

12 / 04 / 2007

City
Burlington

State
VT

Zip Code
05402-0405

Amount of Each Disbursement this Period

2.96

Purpose of Disbursement

Credit card charges

Category/
Type

Candidate Name

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

[MEMO ITEM]

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

B.

Full Name (Last, First, Middle Initial)

Hunan Dynasty

Transaction ID: D143169

Date of Disbursement

Mailing Address 215 Pennsylvania Ave

12 / 04 / 2007

City
Wash

State
DC

Zip Code
20003

Amount of Each Disbursement this Period

22.35

Purpose of Disbursement

Meals

Category/
Type

Candidate Name

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

[MEMO ITEM]

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

C.

Full Name (Last, First, Middle Initial)

Hunan Dynasty

Transaction ID: D143170

Date of Disbursement

Mailing Address 215 Pennsylvania Ave

12 / 04 / 2007

City
Wash

State
DC

Zip Code
20003

Amount of Each Disbursement this Period

29.90

Purpose of Disbursement

Meals

Category/
Type

Candidate Name

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

[MEMO ITEM]

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ 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)
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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

Hunan Dynasty

Mailing Address 215 Pennsylvania Ave

City
Wash

State
DC

Zip Code
20003

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D143171

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

86.65

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Hunan Dynasty

Mailing Address 215 Pennsylvania Ave

City
Wash

State
DC

Zip Code
20003

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D143172

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

27.20

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

LaLoma Restaurant

Mailing Address

City
Washington

State
DC

Zip Code

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

2012

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: D143179

Date of Disbursement

12 / 04 / 2007

Amount of Each Disbursement this Period

54.45

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 32 / 33

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

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NAME OF COMMITTEE (In Full)

Friends of Bernie Sanders

A.

Full Name (Last, First, Middle Initial)

White Tiger Restaurant

Mailing Address

City
Washington

State
DC

Zip Code

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: D143180

Date of Disbursement

M M / D D / Y Y Y Y
12 / 04 / 2007

Amount of Each Disbursement this Period

46.34

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

White Tiger Restaurant

Mailing Address

City
Washington

State
DC

Zip Code

Purpose of Disbursement

Meals

Candidate Name

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

2012

☒ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: D143181

Date of Disbursement

M M / D D / Y Y Y Y
12 / 04 / 2007

Amount of Each Disbursement this Period

49.59

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

15477.82

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 33 / 33

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

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NAME OF COMMITTEE (In Full)
 Friends of Bernie Sanders

A.

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

Transaction ID: D143103
 Date of Disbursement

Mailing Address 2 Bank Street

MM / DD / YYYY
 10 / 11 / 2007

City State Zip Code
 Burlington VT 05401

Amount of Each Disbursement this Period

Purpose of Disbursement
 Bank Service Charges

35.00

Candidate Name

Category/
Type

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

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

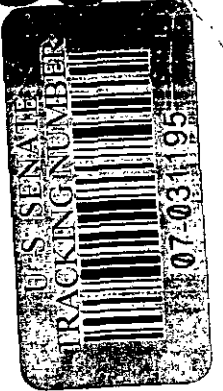
Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

35.00

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

35.00



press

FedEx US Airbill
Express

Tracking Number

BB36 0955 6485

1 From

Date

Sender's Name

Phone

Company

Address

City

State

ZIP

2 Your Internal Billing Reference

3 To

Recipient's Name

Serial/Hub/Phone/Telex

Company

Address

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

One/Two/Three/From

Address

To request a package be held at a specific FedEx location, print FedEx address name.

City

State

ZIP



Part # 156297-435 RIT 10/07

201507
DC-US
IAD

STANDARD OVERNIGHT
WED - 30 JAN A2

5879 5560 9398

D-YKNA

EXpe

Recipient's Copy

4a Express Package Service

☐ FedEx Priority Overnight

☐ FedEx Standard Overnight

☐ FedEx 2Day

☐ FedEx Express Saver

☐ FedEx 1Day Freight

☐ FedEx 2Day Freight

☐ FedEx 3Day Freight

☐ FedEx 4Day Freight

☐ FedEx 5Day Freight

☐ FedEx 7Day Freight

☐ FedEx 9Day Freight

☐ FedEx 12Day Freight

☐ FedEx 15Day Freight

☐ FedEx 18Day Freight

☐ FedEx 21Day Freight

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☐ FedEx 42Day Freight

☐ FedEx 45Day Freight

☐ FedEx 48Day Freight

☐ FedEx 51Day Freight

☐ FedEx 54Day Freight

☐ FedEx 57Day Freight

☐ FedEx 60Day Freight

☐ FedEx 63Day Freight

☐ FedEx 66Day Freight

☐ FedEx 69Day Freight

☐ FedEx 72Day Freight

☐ FedEx 75Day Freight

☐ FedEx 78Day Freight

☐ FedEx 81Day Freight

Packages up to 150 lbs.

Packages over 150 lbs.

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NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

01-25-08

☐

UPS

☐

DHL

☐

AIRBORNE EXPRESS

☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐

NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

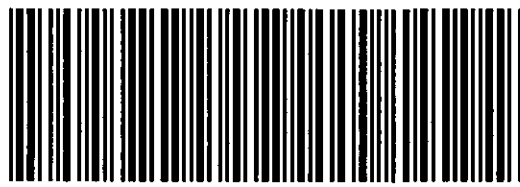
PREPARER

RD

DATE PREPARED

02-01-08

26020052242



28020052243