

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

For An Authorized Committee

Office Use Only

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

Friends of Patrick J. Kennedy Inc.

ADDRESS (number and street)  
▼

P.O. Box 321

☐Check if different  
than previously  
reported. (ACC)

Pawtucket

RI

02860

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00326140

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

RI

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2006

through

03

31

2006

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

Type or Print Name of Treasurer

William San Bento, Jr.

Signature of Treasurer

Electronically Filed by William San Bento, Jr.

Date

04

14

2006

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Patrick J. Kennedy Inc.

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	256660.00	1004216.70
(b) Total Contribution Refunds (from Line 20(d)).....	600.00	6900.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	256060.00	997316.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	189420.26	768402.23
(b) Total Offsets to Operating Expenditures (from Line 14).....	1601.00	5860.05
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	187819.26	762542.18
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1108628.28	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Friends of Patrick J. Kennedy Inc.

Report Covering the Period:

From:

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

To:

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

**I. RECEIPTS****COLUMN A**  
Total This Period**COLUMN B**  
Election Cycle-to-Date**11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than  
Political Committees

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

162200.00

705180.00

(ii) Unitemized.....

2710.00

21571.00

(iii) TOTAL of contributions

from individuals..... ▶

164910.00

726751.00

0.00

0.00

(b) Political Party Committees.....

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

91750.00

277465.70

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

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

256660.00

1004216.70

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

40750.00

101740.08

**13. LOANS**(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

1601.00

5860.05

**15. OTHER RECEIPTS**

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

5916.75

20428.14

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

304927.75

1132244.97

# 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.....	189420.26	768402.23
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	825.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	600.00	6000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	900.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	600.00	6900.00
21. OTHER DISBURSEMENTS.....	21820.00	111670.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	211840.26	887797.23

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1015540.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	304927.75
25. SUBTOTAL (add Line 23 and Line 24).....	1320468.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	211840.26
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1108628.28

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

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

FOR LINE NUMBER: PAGE 5 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Ahmed T. Abdelal

Mailing Address 37 Lynn Shore Dr.

City State Zip Code  
 Lynn MA 01902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northeastern University

Occupation  
Provost

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23691

Amount of Each Receipt this Period

250.00

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

Full Name (Last, First, Middle Initial)

B. John E. Abele

Mailing Address 101 Fairhaven Hill

City State Zip Code  
 Concord MA 01742

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boston Scientific

Occupation  
Chairman

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23852

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

C. George S. Abrams

Mailing Address 22 Bernard Ln.

City State Zip Code  
 Newton MA 02468-2231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23680

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) .....

2750.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Charles Ansbacher

Mailing Address 168 Brattle St.

City

Cambridge

State

MA

Zip Code

02138

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boston Landmarks Orchestra

Occupation  
Conductor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23803

Amount of Each Receipt this Period

1000.00

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

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

Jerome Ansel

Mailing Address 7626 Fenwick Place

City

Boca Raton

State

FL

Zip Code

33496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Real Estate Developer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23753

Amount of Each Receipt this Period

2000.00

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

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

Joseph T. Baerlein

Mailing Address 65 East India Row - Unit 36B

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Choate, Hall & Stewart

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23818

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) .....

3500.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mailing Address 179 Clinton Rd.

City State Zip Code  
 Brookline MA 02445-5815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hill & Barlow

Occupation  
Attorney

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

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23856

Amount of Each Receipt this Period

500.00

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

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

Mailing Address 640 Lewis Wharf

City State Zip Code  
 Boston MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Molecular Insight Pharmac-  
euticals

Occupation  
Chairman & CEO

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23801

Amount of Each Receipt this Period

1000.00

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

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

Mailing Address 177 Milk St.

City State Zip Code  
 Boston MA 02109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Beal Companies

Occupation  
Real Estate

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23679

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Lucy W. Benson

Mailing Address 46 Sunset Ave.

City State Zip Code  
 Amherst MA 01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23678

Amount of Each Receipt this Period

500.00

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

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

Bob Berrin

Mailing Address 6445 South Mitchell Manor Cir.

City State Zip Code  
 Miami FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Realty Services

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23777

Amount of Each Receipt this Period

250.00

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

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

Robert A. Bertsche

Mailing Address 18 Concord St.

City State Zip Code  
 Needham MA 02494

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prince, Lobel, Glovsky &  
Tye

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23831

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) .....

1000.00

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

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

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

FOR LINE NUMBER: PAGE 9 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Daniel B. Brewster, Jr.  
Mailing Address 375 Lexington Ave.

City State Zip Code  
New York NY 10017

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
G&J USA Publishing

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23733

Amount of Each Receipt this Period

1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Richard M. Burnes, Jr.  
Mailing Address 16 Acorn St.

City State Zip Code  
Boston MA 02108

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Charles River Ventures

Occupation  
Partner

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

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C23855

Amount of Each Receipt this Period

500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Charles Campion  
Mailing Address 284 Dean Rd.

City State Zip Code  
Brookline MA 02445-4171

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Dewey Square Group

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C23853

Amount of Each Receipt this Period

500.00

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

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

2000.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** M. Ellen Carpenter

Mailing Address 8 Whittier Pl.  
Apt. 24A

City State Zip Code  
Boston MA 02114

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Roach & Carpenter, P.C.

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23834

Amount of Each Receipt this Period

250.00

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

Full Name (Last, First, Middle Initial)

**B.** Jay M. Cashman

Mailing Address 549 South St.  
P.O. Box 692396

City State Zip Code  
Quincy MA 02269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Jay Cashman Construction

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23821

Amount of Each Receipt this Period

2100.00

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

Full Name (Last, First, Middle Initial)

**C.** Jay M. Cashman

Mailing Address 549 South St.  
P.O. Box 692396

City State Zip Code  
Quincy MA 02269

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Jay Cashman Construction

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23954

Amount of Each Receipt this Period

800.00

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

Refund issued subsequent  
period

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

3150.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Jay M. Cashman		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 549 South St. P.O. Box 692396		<b>Transaction ID:</b> C23822
City Quincy State MA Zip Code 02269	Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Jay Cashman Construction	Occupation President	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Oscar M. Cerna		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address 2 Grove Isle Dr. Apt. 1110		<b>Transaction ID:</b> C23786
City Coconut Grove State FL Zip Code 33133	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Cernar & Associates	Occupation Managing Director	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Bernard Cherry		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 1 N. Breakers Row		<b>Transaction ID:</b> C23955
City Palm Beach State FL Zip Code 33480	Amount of Each Receipt this Period 800.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Oxbow Corporation	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

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

**3400.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Bernard Cherry

Mailing Address 1 N. Breakers Row

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oxbow Corporation

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23756

Amount of Each Receipt this Period

2100.00

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

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

Bernard Cherry

Mailing Address 1 N. Breakers Row

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oxbow Corporation

Occupation  
Executive

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23757

Amount of Each Receipt this Period

2100.00

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

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

James H. Clark

Mailing Address c/o myCFO  
P.O. Box 10195 - Dept. 1

City State Zip Code  
Palo Alto CA 94303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23770

Amount of Each Receipt this Period

2100.00

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

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

6300.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

James H. Clark

Mailing Address c/o myCFO  
P.O. Box 10195 - Dept. 1

City State Zip Code  
Palo Alto CA 94303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23769

Amount of Each Receipt this Period

2100.00

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

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

John L. Cohan

Mailing Address 241 Kenlyn Rd.

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Margueritaville

Occupation

CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23742

Amount of Each Receipt this Period

500.00

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

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

Maria Cole

Mailing Address 200 Butler St. Suite 203

City State Zip Code  
West Palm Beach FL 33407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation

Dentist

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23762

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) .....

3100.00

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

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

FOR LINE NUMBER: PAGE 14 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Confederated Salish & Kootenai TribesMailing Address P.O. Box 278  
Hwy 93City State Zip Code  
Pablo MT 59855FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C23716

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)Funds Permissible Under  
the Act**B.** Full Name (Last, First, Middle Initial)  
Confederated Tribes of the Colville Reservation

Mailing Address P.O. Box 150

City State Zip Code  
Nespelem WA 99155FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23714

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)Funds Permissible Under  
the Act**C.** Full Name (Last, First, Middle Initial)  
Confederated Tribes of the Siletz Indians

Mailing Address P.O. Box 549

City State Zip Code  
Siletz OR 97380FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23934

Amount of Each Receipt this Period

500.00

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

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

1800.00

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

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

FOR LINE NUMBER: PAGE 15 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Philip H. Corboy Mailing Address 33 N. Dearborn St. City Chicago State IL Zip Code 60602 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Corboy & Demetrio, P.C. Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6 <b>Transaction ID: C23948</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ann C. Corridan Mailing Address 338 King Charles Dr. City Portsmouth State RI Zip Code 02871 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID: C23867</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Corridan Mailing Address 338 King Charles Dr. City Portsmouth State RI Zip Code 02871 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer O'Neill Properties Group Occupation Partner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID: C23869</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3000.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 16 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Cow Creek Band of Umpqua Mailing Address Tribe of Indians 2371 NE Stephens St. Suite 100 City Roseburg State OR Zip Code 97470 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID: C23936</b> Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Funds Permissible Under the Act
<b>B.</b> Full Name (Last, First, Middle Initial) Cow Creek Band of Umpqua Mailing Address Tribe of Indians 2371 NE Stephens St. Suite 100 City Roseburg State OR Zip Code 97470 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID: C23937</b> Amount of Each Receipt this Period 1900.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Funds Permissible Under the Act
<b>C.</b> Full Name (Last, First, Middle Initial) George F. Cronin Mailing Address 58 Cerdan Ave. City Boston State MA Zip Code 02131 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Rasky Baerlin Occupation VP Public Affairs Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID: C23862</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2250.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.**

Full Name (Last, First, Middle Initial)

Sean D'Arcy

Mailing Address 5516 Southwick St.

City State Zip Code  
 Bethesda MD 20817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akin Gump Strauss Hauer  
& Feld LLP

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: C23665

Amount of Each Receipt this Period

250.00

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

**B.**

Full Name (Last, First, Middle Initial)

William H. Davis

Mailing Address 29 Glen Green

City State Zip Code  
 Winchester MA 01890

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ZE-GEN Inc.

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23861

Amount of Each Receipt this Period

500.00

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

**C.**

Full Name (Last, First, Middle Initial)

Danielle E. DeBenedictis

Mailing Address 68 Commercial Wharf

City State Zip Code  
 Boston MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23746

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) .....

1250.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Eugene A. Dellea

Mailing Address 26 Albany Rd.

City State Zip Code  
 West Stockbridge MA 01266

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Berkshire Health Systems

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23689

Amount of Each Receipt this Period

1000.00

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

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

Remedios Diaz-Oliver

Mailing Address 1 Grove Isle  
#204

City State Zip Code  
 Miami FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
All American Containers  
Inc.

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23784

Amount of Each Receipt this Period

500.00

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

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

Gerard F. Doherty

Mailing Address 50 Franklin St.  
Suite 3

City State Zip Code  
 Boston MA 02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GFD Company

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23858

Amount of Each Receipt this Period

1000.00

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

John F. Donohue

Mailing Address 40 Goden St.

City State Zip Code  
 Belmont MA 02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arbella Inc.

Occupation  
President & CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23817

Amount of Each Receipt this Period

500.00

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

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

Joseph R. Donohue

Mailing Address 7 Fairway Dr.

City State Zip Code  
 Andover MA 01810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thornton & Naumes LLP

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23838

Amount of Each Receipt this Period

1000.00

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

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

Donald J. Dowd

Mailing Address 69 Hale St.

City State Zip Code  
 Springfield MA 01108-1727

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Donald Dowd & Associates

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23674

Amount of Each Receipt this Period

2000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 20 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
James M. Driscoll  
Mailing Address 4946 Mill Pond Rd.

City State Zip Code  
Wesley Chapel FL 33543
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: C23871

Amount of Each Receipt this Period

750.00

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

**B.** Full Name (Last, First, Middle Initial)  
John P. Driscoll, Jr.  
Mailing Address 155 Seaport Blvd.  
World Trade Center West

City State Zip Code  
Boston MA 02210
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nutter, McClennen & Fish

Occupation

Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23868

Amount of Each Receipt this Period

500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Joseph E. Driscoll  
Mailing Address 208 Rose Ln.

City State Zip Code  
Haverford PA 19041
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rose Lane Properties

Occupation

Real Estate

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23870

Amount of Each Receipt this Period

1000.00

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

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Eggerman		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 77 Westcliff Rd.		<b>Transaction ID:</b> C23807
City Weston	State MA	Zip Code 02493-1409
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer eScriptions	Occupation Co Founder	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) Thereza Ellis		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 332 Ponte Vedra Blvd.		<b>Transaction ID:</b> C23741
City Ponte Vedra	State FL	Zip Code 32082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Wally Findlay Galleries	Occupation Art Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Mark Emalfarb		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 193 Spyglass Court		<b>Transaction ID:</b> C23743
City Jupiter	State FL	Zip Code 33477
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dyadic International	Occupation President & CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 22 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) David Ertel Mailing Address 16 Tahiti Beach Island Rd. City State Zip Code Coral Gables FL 33143 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Bayview Financial Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23782</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Alexander L. Fanjul Mailing Address 110 Chateaux Dr. City State Zip Code Palm Beach FL 33480 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Florida Crystals Corp. Occupation Manager Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6 <b>Transaction ID: C23766</b> Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Alfonso Fanjul Mailing Address 1 North Clematis St. Suite 200 City State Zip Code West Palm Beach FL 33401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Florida Crystals Corp. Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6 <b>Transaction ID: C23768</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3500.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 23 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Luis Fernandez

Mailing Address 246 Eden Rd.

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Florida Crystals Corp.

Occupation  
Vice President & CFO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23767

Amount of Each Receipt this Period

1000.00

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

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

Douglas P. Fiebelkorn

Mailing Address 29 Appleton St.

City State Zip Code  
Boston MA 02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Landa & Altsher

Occupation  
CPA

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23806

Amount of Each Receipt this Period

1000.00

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

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

I.K. Fisher

Mailing Address 5881 SW 105th St.

City State Zip Code  
Miami FL 33156

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capital Realty Services

Occupation  
Real Estate

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23776

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) .....

2250.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Robert T. Foley

Mailing Address 9 Reflection Dr.

City State Zip Code  
 Sandwich MA 02563

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pyramid Advisors LLC

Occupation  
Chief Talent Officer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23944

Amount of Each Receipt this Period

1000.00

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

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

Mary Lynn Gage

Mailing Address 1533 Virginia Way

City State Zip Code  
 La Jolla CA 92037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Freelance Editor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23651

Amount of Each Receipt this Period

250.00

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

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

Lia B. Glovsky

Mailing Address 330 Beacon St. Apt. A-61

City State Zip Code  
 Boston MA 02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23826

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) .....

1750.00

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

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

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

FOR LINE NUMBER: PAGE 25 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Richard D. Glovsky  
Mailing Address 700 Boylston St. #10-H

City State Zip Code  
Boston MA 02199

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prince, Lobel, Glovsky &  
Tye

Occupation  
Attorney

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23827

Amount of Each Receipt this Period

1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert J. Glovsky  
Mailing Address 18 Old Connecticut Path

City State Zip Code  
Wayland MA 01778

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz Levin Financial Adv-  
isors

Occupation  
President

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23828

Amount of Each Receipt this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Paul Goldenberg  
Mailing Address 500 N. Harbor Blvd.

City State Zip Code  
La Habra CA 90631

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Paul's TV & Video

Occupation  
Owner

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23732

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Abraham D. Gosman

Mailing Address 175 Bradley Pl.

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mediplex Group

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23747

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**B.** Stephen S. Gray

Mailing Address 114 Naples Rd.

City State Zip Code  
Brookline MA 02446

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Recovery Group

Occupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23810

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**C.** Barbara Grossman

Mailing Address 30 Huntington Rd.

City State Zip Code  
Newton MA 02458-2417

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Tufts University

Occupation  
Professor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23650

Amount of Each Receipt this Period

2000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 27 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Steven Grossman  
Mailing Address 30 Huntington Rd.

City State Zip Code  
Newton MA 02458-2417
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mass Envelope PlusOccupation  
Executive
Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C23649

Amount of Each Receipt this Period

500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Harding  
Mailing Address 99 Bedford St.

City State Zip Code  
Boston MA 02111
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Corby North Bridge Securi-  
tiesOccupation  
Investment Banker
Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23823

Amount of Each Receipt this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Gerald T. Harrington  
Mailing Address 67 Hillard Avenue

City State Zip Code  
Warwick RI 02886
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol City Group LLCOccupation  
Managing Director
Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt

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

Transaction ID: C23946

Amount of Each Receipt this Period

2100.00

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

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

3600.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Billy J. Harris		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 777 Ruddman Ave.		<b>Transaction ID:</b> C23759
City Meskegon	State MI	Zip Code 49445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Management Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) Leslie M. Holvey-Linder		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 112 Roosevelt Place		<b>Transaction ID:</b> C23738
City West Palm Beach	State FL	Zip Code 33405
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Barclays Intl Realty	Occupation Realtor	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Nancy L. Howland		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 81 Beacon St.		<b>Transaction ID:</b> C23832
City Boston	State MA	Zip Code 02108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Howland Enterprises	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Craig Jalbert		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 124 Washington St.		<b>Transaction ID:</b> C23811
City Foxboro	State MA	Zip Code 02035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Verdolino and Lowey, P.C.	Occupation Accountant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) Ann C. Jameson		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 15 Sagamore Rd.		<b>Transaction ID:</b> C23860
City Wellesley	State MA	Zip Code 02481-2813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Rasky Baerlin	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Jamestown S'Klallam Tribe		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 1033 Old Blyn Highway		<b>Transaction ID:</b> C23709
City Sequim	State WA	Zip Code 98382
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

Permissible Funds Under the Act

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

3500.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Robert Karam  
Mailing Address 456 Rock Street, Box 549

City State Zip Code  
Fall River MA 02720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Karam Insurance

Occupation  
Owner

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23802

Amount of Each Receipt this Period

1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Stephen G. Kasnet  
Mailing Address 1 University Ln.

City State Zip Code  
Manchester By The MA 01944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Calypso Management LLC

Occupation  
Investment Management

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

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23864

Amount of Each Receipt this Period

500.00

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

**C.** Full Name (Last, First, Middle Initial)  
Colleen M. Kavanaugh  
Mailing Address 6028 Fort Hunt Rd.

City State Zip Code  
Alexandria VA 22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DCS Congressional

Occupation  
Director of Operations

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

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23847

Amount of Each Receipt this Period

100.00

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

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Colleen M. Kavanaugh  
Mailing Address 6028 Fort Hunt Rd.

City State Zip Code  
Alexandria VA 22307

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DCS Congressional

Occupation  
Director of Operations

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

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

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

Transaction ID: C23848

Amount of Each Receipt this Period

1900.00

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

**B.** Full Name (Last, First, Middle Initial)  
Dennis Kearney  
Mailing Address 7 Madison Ave.

City State Zip Code  
Winchester MA 01890

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kearney Donovan & McGee  
P.C.

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23820

Amount of Each Receipt this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
Samuel A. Keesal, Jr.  
Mailing Address 400 Oceangate, 14th Fl.

City State Zip Code  
Long Beach CA 90802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Keesal Young & Logan

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
4100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 7 / 2 0 0 6

Transaction ID: C23701

Amount of Each Receipt this Period

2000.00

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

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

4900.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Samuel A. Keesal, Jr.

Mailing Address 400 Oceangate, 14th Fl.

City State Zip Code  
 Long Beach CA 90802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Keesal Young & Logan

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 7 / 2 0 0 6

Transaction ID: C23700

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**B.** Patricia M. Kessler

Mailing Address 1 Commonwealth Ave.

City State Zip Code  
 Boston MA 02116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23774

Amount of Each Receipt this Period

2100.00

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

Full Name (Last, First, Middle Initial)

**C.** Patricia M. Kessler

Mailing Address 1 Commonwealth Ave.

City State Zip Code  
 Boston MA 02116

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23773

Amount of Each Receipt this Period

2100.00

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

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

4300.00

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

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

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

FOR LINE NUMBER: PAGE 33 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Keweenaw Bay Indian Community

Mailing Address 107 Beartown Rd.

City State Zip Code  
 Baraga MI 49908

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23712

Amount of Each Receipt this Period

1000.00

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

Funds Permissible Under  
the Act

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

Paul G. Kirk, Jr.

Mailing Address P.O. Box 1433

City State Zip Code  
 Marstons Mills MA 02648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23677

Amount of Each Receipt this Period

500.00

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

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

Kerry S. Lane

Mailing Address 580 S. Sapodilla Ave. #103

City State Zip Code  
 West Palm Beach FL 33401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23751

Amount of Each Receipt this Period

500.00

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

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Las Vegas Paiute Tribe

Mailing Address 1 Paiute Dr.

City State Zip Code  
 Las Vegas NV 89106

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: C23718

Amount of Each Receipt this Period

300.00

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

Funds Permissible Under  
the Act

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

Kevin J. Leary

Mailing Address 16 Marilyn Rd.

City State Zip Code  
 Milton MA 02186

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
VPNE Parking Solutions

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23843

Amount of Each Receipt this Period

500.00

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

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

Landra Lewis

Mailing Address 210 Peachbloom Hill

City State Zip Code  
 Berea KY 40403

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23670

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) .....

1050.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Jennifer Littlefield

Mailing Address 16 Longfellow Park

City State Zip Code  
 Cambridge MA 02138

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Brigham & Women's Hospital

Occupation  
Psychiatric Social Worker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23842

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**B.** Keith Lowey

Mailing Address 5 Wildwood Rd.

City State Zip Code  
 Medway MA 02053

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Verdolino & Lowey, P.C.

Occupation  
CPA

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23812

Amount of Each Receipt this Period

2000.00

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

Full Name (Last, First, Middle Initial)

**C.** John M. Lynch

Mailing Address 12 Post Office Sq. Ln.

City State Zip Code  
 Boston MA 02109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Lynch, DeSimone & Nylén  
LLP

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23814

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) .....

**3250.00**

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

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

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

FOR LINE NUMBER: PAGE 36 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Gus Machado		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address 1200 West 49th St.		<b>Transaction ID:</b> C23785
City Hialeah	State FL	Zip Code 33012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Gus Machado Food Inc.	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) John P. Manning		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address One Boston Pl. Suite 2100		<b>Transaction ID:</b> C23833
City Boston	State MA	Zip Code 02108
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Boston Capital Partners	Occupation President & CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Mashantucket Pequot Tribal Nation		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address P.O. Box 3008		<b>Transaction ID:</b> C23703
City Ledyard	State CT	Zip Code 06339-3008
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

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

Funds Permissible Under the Act

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

1600.00

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

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

FOR LINE NUMBER: PAGE 37 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mashantucket Pequot Tribal Nation

Mailing Address P.O. Box 3008

City State Zip Code  
Ledyard CT 06339-3008
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23704

Amount of Each Receipt this Period

1900.00

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

Match-E-Be-Nash-She-Wish Band of Pottawatomis Indians

Mailing Address Gun Lake Tribe  
P.O. Box 218
City State Zip Code  
Dorr MI 49323
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23715

Amount of Each Receipt this Period

1000.00

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

David J. McCourt

Mailing Address 257 Sanford Ave.

City State Zip Code  
Palm Beach FL 33480
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ABCO WeldingOccupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23744

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) .....

3400.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) David J. McMorris Mailing Address 100 Summer St. 30th Fl. City Boston State MA Zip Code 02110 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Thornton & Naumes Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1750.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID: C23836</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Morongo Band of Mission Indians Mailing Address P.O. Box 366 City Cabazon State CA Zip Code 92230 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID: C23706</b> Amount of Each Receipt this Period 1100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Funds Permissible Under the Act
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Motta Mailing Address 9 Saddle Hill Ln. City Southborough State MA Zip Code 01772 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State Street Bank Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID: C23819</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3100.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 39 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Peter M. Nicholas		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address One Boston Scientific Place		<b>Transaction ID:</b> C23849
City Natick	State MA	Zip Code 01760
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Boston Scientific	Occupation Chairman	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) Marcia M. O'Connell		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 40 Hatherly Rd.		<b>Transaction ID:</b> C23799
City Quincy	State MA	Zip Code 02170
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Peter F. O'Connell		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 500 Victory Rd.		<b>Transaction ID:</b> C23800
City Quincy	State MA	Zip Code 02171
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Marina Bay Company	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Thomas P. O'Connell

Mailing Address 737 Main St.

City State Zip Code  
Hingham MA 02043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23798

Amount of Each Receipt this Period

2000.00

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

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

G. John O'Hanlon

Mailing Address 2201 Woodmont Rd.

City State Zip Code  
Alexandria VA 22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Washington Group

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23844

Amount of Each Receipt this Period

2000.00

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

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

Oneida Tribe of Indians of Wisconsin

Mailing Address P.O. Box 365

City State Zip Code  
Oneida WI 54155

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23713

Amount of Each Receipt this Period

1000.00

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

Funds Permissible Under  
the Act

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 41 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Richard J. O'Neill		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 6
Mailing Address 58 Acacia Tree Ln.		<b>Transaction ID:</b> C23684
City Irvine	State CA	Zip Code 92612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Restaurateur	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) John E. Oxendine		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 2727 N. Ocean Blvd. A-506		<b>Transaction ID:</b> C23765
City Boca Raton	State FL	Zip Code 33431
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Blackstar LLC	Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ann B. Perik		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 2 Avery St. 23B South		<b>Transaction ID:</b> C23845
City Boston	State MA	Zip Code 02111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

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

3100.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Ann B. Perik

Mailing Address 2 Avery St. 23B South

City State Zip Code  
 Boston MA 02111

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

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

Transaction ID: C23846

Amount of Each Receipt this Period

2100.00

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

Full Name (Last, First, Middle Initial)

**B.** Lisa Perry

Mailing Address 1 Sutton Pl. South

City State Zip Code  
 New York NY 10022

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23752

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**C.** Lois Pope

Mailing Address 6274 Linton Blvd.  
Suite 103

City State Zip Code  
 Delray Beach FL 33484

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23771

Amount of Each Receipt this Period

2100.00

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

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

5200.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Lois Pope

Mailing Address 6274 Linton Blvd.  
Suite 103

City State Zip Code  
Delray Beach FL 33484

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23772

Amount of Each Receipt this Period

2100.00

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

Full Name (Last, First, Middle Initial)

**B.** Prairie Island Tribal Council

Mailing Address 5636 Sturgeon Lake Rd.

City State Zip Code  
Welch MN 55089

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23711

Amount of Each Receipt this Period

1000.00

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

Funds Permissible Under  
the Act

Full Name (Last, First, Middle Initial)

**C.** Victor J. Pujals

Mailing Address 800 Brickell Ave. Suite 710

City State Zip Code  
Miami FL 33129

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CDM

Occupation

Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23796

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) .....

3600.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) David E. Quint		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 12205 Vista Ln.		<b>Transaction ID:</b> C23780
City Pinecrest	State FL	Zip Code 33156
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Bayview Financial	Occupation Manager	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence B. Rasky		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 20 Bridle Path		<b>Transaction ID:</b> C23859
City Westwood	State MA	Zip Code 02090
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Rasky Baerlein Group	Occupation Partner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

<b>C.</b> Full Name (Last, First, Middle Initial) Michael Reilly		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 30 Corwood Dr.		<b>Transaction ID:</b> C23840
City Weston	State MA	Zip Code 02493-2210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RW Corby	Occupation Principal	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Nicole Rowe		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address 2704 N. Fillmore		<b>Transaction ID:</b> C23942
City Little Rock	State AR	Zip Code 72207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Information Requested Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 4200.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Nicole Rowe		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 8 / 2 0 0 6
Mailing Address 2704 N. Fillmore		<b>Transaction ID:</b> C23941
City Little Rock	State AR	Zip Code 72207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer Information Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Election Cycle-to-Date ▼ 4200.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Anthony S. Rust		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 194 Indigo Point Rd.		<b>Transaction ID:</b> C23841
City South Kingstown	State RI	Zip Code 02879
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investment Manager Election Cycle-to-Date ▼ 1000.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

5200.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Noreen G. Sablotsky  
Mailing Address 221 Casuarina Concourse

City State Zip Code  
Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-employed

Occupation  
Investor

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

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: C23781

Amount of Each Receipt this Period

250.00

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

**B.** Full Name (Last, First, Middle Initial)  
Michael Saegh  
Mailing Address 8 Kendall Dr.

City State Zip Code  
Foxboro MA 02035

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Universal Resources

Occupation  
Vice Chairman

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23813

Amount of Each Receipt this Period

1000.00

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

**C.** Full Name (Last, First, Middle Initial)  
San Manuel Tribal Administration  
Mailing Address 26524 Indian Rd.

City State Zip Code  
Highland CA 92346

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
4100.00

Date of Receipt

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

Transaction ID: C23707

Amount of Each Receipt this Period

100.00

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

Funds Permissible Under  
the Act

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

1350.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

San Manuel Tribal Administration

Mailing Address 26524 Indian Rd.

City State Zip Code  
 Highland CA 92346

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4100.00

Date of Receipt

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

Transaction ID: C23708

Amount of Each Receipt this Period

2000.00

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

Funds Permissible Under  
the Act

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

John R. Sasso

Mailing Address 4 Constellation Wharf

City State Zip Code  
 Charlestown MA 02129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Advanced Strategies

Occupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23676

Amount of Each Receipt this Period

1000.00

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

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

Gerald Schuster

Mailing Address 132 Yarmouth Rd.

City State Zip Code  
 Brookline MA 02467-2800

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Continental Wingate Compa-  
ny

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23754

Amount of Each Receipt this Period

2100.00

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

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

5100.00

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

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

FOR LINE NUMBER: PAGE 48 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Gerald Schuster

Mailing Address 132 Yarmouth Rd.

City State Zip Code  
Brookline MA 02467-2800
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Continental Wingate Compa-  
nyOccupation  
CEO
Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23755

Amount of Each Receipt this Period

2100.00

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

Full Name (Last, First, Middle Initial)

B. Michael F. Sears

Mailing Address 368 Potter Rd.

City State Zip Code  
West Palm Beach FL 33405
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information RequestedOccupation  
Information Requested
Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23748

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

C. Joseph Shay, Jr.

Mailing Address 3 Wyndemere Dr.

City State Zip Code  
Southboro MA 01772
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kens Foods, Inc.Occupation  
Treasurer
Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: C23645

Amount of Each Receipt this Period

200.00

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

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

2800.00

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

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

FOR LINE NUMBER: PAGE 49 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Joseph Shay, Jr.

Mailing Address 3 Wyndemere Dr.

City	State	Zip Code
Southboro	MA	01772

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Kens Foods, Inc.Occupation  
Treasurer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

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

Transaction ID: C23688

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**B.** Robert A. Silverman

Mailing Address 106 Farlow Rd.

City	State	Zip Code
Newton	MA	02458

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Emerson CollegeOccupation  
Vice President of Finance

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23863

Amount of Each Receipt this Period

250.00

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

Full Name (Last, First, Middle Initial)

**C.** Robert L. Simmons

Mailing Address 222 N. Ocean Blvd.

City	State	Zip Code
Delray Beach	FL	33483

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cunningham BroadcastingOccupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23943

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) .....

1250.00

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

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

FOR LINE NUMBER: PAGE 50 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Soboba Band of Luiseno Indians

Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23717

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**B.** Susan L. Solomont

Mailing Address 220 Ridgeway Rd.

City State Zip Code  
Weston MA 02493-2707
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Philanthropic InitiativeOccupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23945

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**C.** Alice Sparks

Mailing Address 817 Squire Hills Dr.

City State Zip Code  
Villa Hills KY 41017
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23668

Amount of Each Receipt this Period

2100.00

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

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

4100.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Alice Sparks

Mailing Address 817 Squire Hills Dr.

City State Zip Code  
 Villa Hills KY 41017

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23669

Amount of Each Receipt this Period

1900.00

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

Full Name (Last, First, Middle Initial)

B. Gregory P. Spier

Mailing Address 39 Prospect St.

City State Zip Code  
 Foxboro MA 02035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maystar Realty Corp.

Occupation

Builder

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23809

Amount of Each Receipt this Period

250.00

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

Full Name (Last, First, Middle Initial)

C. Gregory P. Spier

Mailing Address 39 Prospect St.

City State Zip Code  
 Foxboro MA 02035

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maystar Realty Corp.

Occupation

Builder

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23808

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) .....

2400.00

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

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

FOR LINE NUMBER: PAGE 52 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** St. Regis Mohawk Tribal Council

Mailing Address 412 State Route 37

City	State	Zip Code
Akwesasne	NY	13655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C23720

Amount of Each Receipt this Period

900.00

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

Full Name (Last, First, Middle Initial)

**B.** St. Regis Mohawk Tribal Council

Mailing Address 412 State Route 37

City	State	Zip Code
Akwesasne	NY	13655

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C23719

Amount of Each Receipt this Period

100.00

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

Full Name (Last, First, Middle Initial)

**C.** Michael Steinger

Mailing Address 3146 San Michele Dr.

City	State	Zip Code
Palm Beach Gardens	FL	33418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Steinger & IscoeOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	6

Transaction ID: C23763

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) .....

1500.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Marylynne Stephan

Mailing Address Information Requested

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation

Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23745

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**B.** David C. Strouss

Mailing Address 45 Candlewood Rd.

City State Zip Code

Ipswich

MA

01938

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Thornton & Naumes

Occupation

Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23835

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**C.** Gary D. Sullivan

Mailing Address 165 Middlesex Tpke, Suite 205

City State Zip Code

Bedford

MA

01730

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NEPB Inc.

Occupation

Benefits President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23815

Amount of Each Receipt this Period

250.00

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

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Craig M. Tateronis

Mailing Address 3 Oscars Way

City State Zip Code  
 North Reading MA 01864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Prince, Lobel, Glovsky &  
Tye

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23829

Amount of Each Receipt this Period

250.00

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

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

Paul Taylor

Mailing Address 439 Forsheer Dr.

City State Zip Code  
 Chesterfield MO 63017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: C23935

Amount of Each Receipt this Period

1000.00

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

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

James R. Tobin

Mailing Address 33 Huckleberry Hill Rd.

City State Zip Code  
 Lincoln MA 01773

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boston Scientific

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23851

Amount of Each Receipt this Period

2000.00

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

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

3250.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mailing Address 21 Academy Ave.

City State Zip Code  
Bristol RI 02809

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Capitol City Group

Occupation  
Attorney

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

Election Cycle-to-Date ▼

2100.00

Date of Receipt

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

Transaction ID: C23947

Amount of Each Receipt this Period

2100.00

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

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

Mailing Address 11 Herrick St.

City State Zip Code  
Winchester MA 01890

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Thornton & Naumes

Occupation  
Attorney

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

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23837

Amount of Each Receipt this Period

1000.00

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

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

Mailing Address 104 Register Rd.

City State Zip Code  
Marion MA 02738

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lockheed Martin

Occupation  
Vice President

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

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23681

Amount of Each Receipt this Period

1000.00

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

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

4100.00

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

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

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

FOR LINE NUMBER: PAGE 56 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Bruce Watts  
Mailing Address Information Requested

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23758

Amount of Each Receipt this Period

1000.00

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

**B.** Full Name (Last, First, Middle Initial)  
Mark Weiner  
Mailing Address 140 Fox Run

City State Zip Code  
East Greenwich RI 02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Innovations Inc.

Occupation  
President

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

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

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

Transaction ID: C23939

Amount of Each Receipt this Period

2100.00

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

**C.** Full Name (Last, First, Middle Initial)  
Mark Weiner  
Mailing Address 140 Fox Run

City State Zip Code  
East Greenwich RI 02818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Financial Innovations Inc.

Occupation  
President

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

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

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

Transaction ID: C23940

Amount of Each Receipt this Period

2100.00

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

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

5200.00

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

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

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

FOR LINE NUMBER: PAGE 57 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Muriel Weingrow		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 51 Whcatley Rd.		<b>Transaction ID:</b> C23750
City Old Westbury	State NY	Zip Code 11568-1208
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Homemaker Election Cycle-to-Date ▼ 500.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

<b>B.</b> Full Name (Last, First, Middle Initial) Allison B. Weiss		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 1455 Ocean Dr. Apt. 1607		<b>Transaction ID:</b> C23739
City Miami Beach	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Investor Election Cycle-to-Date ▼ 2000.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

<b>C.</b> Full Name (Last, First, Middle Initial) Diane N. Weiss		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address 1500 South Ocean Blvd.		<b>Transaction ID:</b> C23740
City Boca Raton	State FL	Zip Code 33432
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 750.00	
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mark M. Weld

Mailing Address 15 School St.

City State Zip Code  
 Manchester MA 01944

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Clarion Partners

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23816

Amount of Each Receipt this Period

500.00

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

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

Sheldon Whitehouse

Mailing Address 32 Elmgrove Ave.

City State Zip Code  
 Providence RI 02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23673

Amount of Each Receipt this Period

1900.00

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

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

Sheldon Whitehouse

Mailing Address 32 Elmgrove Ave.

City State Zip Code  
 Providence RI 02906

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C23672

Amount of Each Receipt this Period

100.00

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
E. Richard Yulman  
Mailing Address 555 Leucadendra Dr.

City State Zip Code  
Coral Gables FL 33156

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Serta Mattress Company

Occupation  
Executive

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

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C23779

Amount of Each Receipt this Period

500.00

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

**B.** Full Name (Last, First, Middle Initial)  
Steinger & Iscoe, P.A.  
Mailing Address 1645 Palm Beach Lakes Blvd.  
9th Fl.

City State Zip Code  
West Palm Beach FL 33401

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

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

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23749

Amount of Each Receipt this Period

500.00

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

PARTNERSHIP--partners below if itemized

**C.** Full Name (Last, First, Middle Initial)  
Michael Steinger  
Mailing Address 3146 San Michele Dr.

City State Zip Code  
Palm Beach Gardens FL 33418

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Steinger & Iscoe

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: C23949

Amount of Each Receipt this Period

500.00

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

[MEMO ITEM]

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

1000.00

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

162200.00

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

FOR LINE NUMBER: PAGE 60 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A. ACP Services PAC**Mailing Address 2011 Pennsylvania Ave. NW  
Suite 800City State Zip Code  
Washington DC 20006FEC ID number of contributing  
federal political committee.**C** C00403881

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23932

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**B. AFGE PAC**

Mailing Address 80 F St., NW

City State Zip Code  
Washington DC 20001FEC ID number of contributing  
federal political committee.**C** C00009936

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23687

Amount of Each Receipt this Period

500.00

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

Full Name (Last, First, Middle Initial)

**C. AFLAC Inc. PAC**

Mailing Address 1932 Wynnton Rd.

City State Zip Code  
Columbus GA 31999FEC ID number of contributing  
federal political committee.**C** C00034157

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23659

Amount of Each Receipt this Period

1000.00

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** AFLAC Inc. PAC

Mailing Address 1932 Wynnton Rd.

City State Zip Code  
 Columbus GA 31999

FEC ID number of contributing  
federal political committee.

**C** C00034157

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 4 / 2 0 0 6

Transaction ID: C23736

Amount of Each Receipt this Period

1500.00

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

Full Name (Last, First, Middle Initial)

**B.** AGSHF Civic Action Committee

Mailing Address 1333 New Hampshire Ave. NW  
 Suite 400

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00104901

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1125.00

Date of Receipt

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

Transaction ID: C23660

Amount of Each Receipt this Period

750.00

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

Full Name (Last, First, Middle Initial)

**C.** American College of Surgeons Professional Assoc. PAC

Mailing Address 1640 Wisconsin Ave. NW

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00382424

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23721

Amount of Each Receipt this Period

1500.00

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

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

3750.00

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

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

FOR LINE NUMBER: PAGE 62 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) American Dental PAC Mailing Address 1111 - 14th Street, NW Suite 1100 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00000729 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID: C23663</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) American Nurses Association PAC Mailing Address 600 Maryland Ave SW Suite 100 West City Washington State DC Zip Code 20024 FEC ID number of contributing federal political committee. <b>C</b> C00017525 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6 <b>Transaction ID: C23654</b> Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) American Psychiatric Association PAC Mailing Address 1400 K. St. NW City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00373696 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID: C23694</b> Amount of Each Receipt this Period 1500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3500.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 63 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** American Psychiatric Association PAC

Mailing Address 1400 K. St. NW

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00373696

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: C23695

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**B.** Amgen Political Action Committee

Mailing Address 1 Amgen Center Dr.

City

Thousand Oaks

State

CA

Zip Code

91320

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: C23804

Amount of Each Receipt this Period

5000.00

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

Full Name (Last, First, Middle Initial)

**C.** Amgen Political Action Committee

Mailing Address 1 Amgen Center Dr.

City

Thousand Oaks

State

CA

Zip Code

91320

FEC ID number of contributing  
federal political committee.

**C** C00251876

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: C23805

Amount of Each Receipt this Period

5000.00

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

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

11000.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Association of Trial Lawyers of America

Mailing Address 1050 31st Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: C23692

Amount of Each Receipt this Period

4000.00

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

Full Name (Last, First, Middle Initial)

**B.** Association of Trial Lawyers of America

Mailing Address 1050 31st Street, NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing  
federal political committee.

**C** C00024521

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: C23839

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**C.** AT&T Federal PAC

Mailing Address 175 E. Houston  
Room 7-A-50

City

San Antonio

State

TX

Zip Code

78205

FEC ID number of contributing  
federal political committee.

**C** C00109017

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23653

Amount of Each Receipt this Period

1000.00

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

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

6000.00

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

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

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

FOR LINE NUMBER: PAGE 65 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
BellSouth Federal Political Action Committee

Mailing Address 1133 21st. St. NW  
Suite 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee. **C** C00174060

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23685

Amount of Each Receipt this Period

1000.00

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

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

Boilermakers-Blacksmiths LEAP

Mailing Address 753 State Avenue  
Suite # 565

City State Zip Code  
Kansas City KS 66101

FEC ID number of contributing  
federal political committee. **C** C00005157

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

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

Transaction ID: C23656

Amount of Each Receipt this Period

1000.00

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

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

Bricklayers & Allied Craftworkers PAC

Mailing Address 1776 Eye St. NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** C00003632

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: C23938

Amount of Each Receipt this Period

4000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 66 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.**

Full Name (Last, First, Middle Initial)

Citizens Financial Group Inc. PAC

Mailing Address One Citizens Plaza

City State Zip Code  
Providence RI 02903
FEC ID number of contributing  
federal political committee.**C** C00307249

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

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

Transaction ID: C23824

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

College of American Pathologists PAC

Mailing Address 1350 I St. NW Suite 590

City State Zip Code  
Washington DC 20005
FEC ID number of contributing  
federal political committee.**C** C00274944

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C23696

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

Community Action Program PAC (SSF of NCAF)

Mailing Address 810 First St. NE  
Suite 530
City State Zip Code  
Washington DC 20002
FEC ID number of contributing  
federal political committee.**C** C00163048

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23657

Amount of Each Receipt this Period

5000.00

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

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

7000.00

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

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

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

FOR LINE NUMBER: PAGE 67 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Credit Union Legislative

Mailing Address Action Council of CUNA  
805 15th St. NW Suite 300

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00007880

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23699

Amount of Each Receipt this Period

5000.00

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

Full Name (Last, First, Middle Initial)

**B.** DLA Piper PAC

Mailing Address 1200 19th St. NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00151340

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: C23857

Amount of Each Receipt this Period

2500.00

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

Full Name (Last, First, Middle Initial)

**C.** Evergreen Fund

Mailing Address 607 14th St. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00337840

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23698

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) .....

8000.00

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

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

FOR LINE NUMBER: PAGE 68 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mailing Address 3190 Fairview Park Dr.

City State Zip Code  
 Falls Church VA 22042

FEC ID number of contributing  
federal political committee.**C** C00078451

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

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

Transaction ID: C23664

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
**B.** Holland & Knight Comm. for

Mailing Address Effective Government  
2099 Pennsylvania Ave. NW Suite 10

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.**C** C00171330

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23662

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)  
**C.** International Assoc. of Fire Fighters

Mailing Address 1750 New York Ave, NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.**C** C00029447

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: C23661

Amount of Each Receipt this Period

2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 69 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
International Longshoremens's Assoc. AFL-CIO

Mailing Address 17 Battery Pl.

City State Zip Code  
New York NY 10004
FEC ID number of contributing  
federal political committee.**C** C00158576

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: C23686

Amount of Each Receipt this Period

5000.00

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

**B.** Full Name (Last, First, Middle Initial)  
International Union of Painters & Allied Trades
Mailing Address IUPAT  
1750 New York Ave. NW
City State Zip Code  
Washington DC 20006
FEC ID number of contributing  
federal political committee.**C** C00000885

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: C23734

Amount of Each Receipt this Period

5000.00

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

**C.** Full Name (Last, First, Middle Initial)  
McKesson Corporation Employee Political Fund

Mailing Address One Post St. 34th Fl.

City State Zip Code  
San Francisco CA 94104
FEC ID number of contributing  
federal political committee.**C** C00108035

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23671

Amount of Each Receipt this Period

2000.00

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

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

12000.00

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

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

FOR LINE NUMBER: PAGE 70 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

National Action Committee (NACPAC)

Mailing Address 3389 Sheridan St.  
Suite 424

City	State	Zip Code
Hollywood	FL	33021

FEC ID number of contributing  
federal political committee.**C** C00147983

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23731

Amount of Each Receipt this Period

500.00

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

National Association of Psychiatric

Mailing Address Health Systems PAC  
7th St. NW Suite 625

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing  
federal political committee.**C** C00107136

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23697

Amount of Each Receipt this Period

1000.00

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

NEA Fund for Children &amp;

Mailing Address Public Education  
1201 16th St. NW Suite 421

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing  
federal political committee.**C** C00003251

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C23655

Amount of Each Receipt this Period

2000.00

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

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

3500.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
O'Neill and Associates PAC

Mailing Address 1 Beacon St.  
Suite 1600

City State Zip Code  
Boston MA 02108

FEC ID number of contributing  
federal political committee. **C** C00362210

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2006

Transaction ID: C23865

Amount of Each Receipt this Period

1000.00

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

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

Mailing Address 1101 Vermont Ave. NW

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 08 / 2006

Transaction ID: C23693

Amount of Each Receipt this Period

1000.00

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

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

Mailing Address 2550 M. St. NW

City State Zip Code  
Washington DC 20037

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

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 29 / 2006

Transaction ID: C23933

Amount of Each Receipt this Period

1000.00

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

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Raytheon PAC

Mailing Address 870 Winter St.

City State Zip Code  
Waltham MA 02451

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

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23658

Amount of Each Receipt this Period

1000.00

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

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

Sonnenschein PAC

Mailing Address 8000 Sears Tower

City State Zip Code  
Chicago IL 60606

FEC ID number of contributing  
federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: C23735

Amount of Each Receipt this Period

1000.00

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

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

Sun Political Action Committee

Mailing Address 999 Ponce de Leon Blvd.  
Suite 625

City State Zip Code  
Coral Gables FL 33134

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

Name of Employer Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: C23775

Amount of Each Receipt this Period

2500.00

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

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

4500.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 73 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Tercentenary Fund

Mailing Address 1650 Arch St. 22nd Fl.

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C** C00162719

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23866

Amount of Each Receipt this Period

1000.00

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

Full Name (Last, First, Middle Initial)

**B.** United Food & Commercial Workers ABC

Mailing Address 1775 K St. NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00002766

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 4 / 2 0 0 6

Transaction ID: C23737

Amount of Each Receipt this Period

5000.00

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

Full Name (Last, First, Middle Initial)

**C.** United States Sugar Corp. Employee Stock Ownership Plan PAC Inc.

Mailing Address P.O. Box 1207

City State Zip Code  
Clewiston FL 33440

FEC ID number of contributing  
federal political committee.

**C** C00234120

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C23797

Amount of Each Receipt this Period

1000.00

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

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

7000.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
United States Telecom Association PAC

Mailing Address 1401 H St. NW  
Suite 600

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee. **C** C00000984

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: C23666

Amount of Each Receipt this Period

1000.00

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

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

United Steelworkers of America PAC

Mailing Address 5 Gateway Center

City State Zip Code  
Pittsburgh PA 15222

FEC ID number of contributing  
federal political committee. **C** C00003590

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

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

Transaction ID: C23690

Amount of Each Receipt this Period

5000.00

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

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

US Cuba Democracy PAC

Mailing Address 1200 W. 49th St.

City State Zip Code  
Hialeah FL 33012

FEC ID number of contributing  
federal political committee. **C** C00387720

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

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

Transaction ID: C23783

Amount of Each Receipt this Period

4000.00

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

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

10000.00

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

91750.00

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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

NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation

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

Election Cycle-to-Date ▼  
101740.08

Date of Receipt

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

Transaction ID: C23873

Amount of Each Receipt this Period

40750.00

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

Joint Fundraiser

**B.** Full Name (Last, First, Middle Initial)  
Judith Adler  
Mailing Address 4549 Pine Tree Dr.

City State Zip Code  
Miami Beach FL 33140

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

Name of Employer Occupation  
Homemaker

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

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: C23880

Amount of Each Receipt this Period

500.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
Jose Aguilera  
Mailing Address 10773 NW 58th St.  
Suite 234

City State Zip Code  
Miami FL 33178

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

Name of Employer Occupation  
New Century Tobacco Group, LLC Vice President Sales & Marketing

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

Election Cycle-to-Date ▼  
750.00

Date of Receipt

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

Transaction ID: C23881

Amount of Each Receipt this Period

750.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

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

40750.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Jonathan Alexander

Mailing Address 818 Connecticut Ave., NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Monument Strategies

Occupation  
Principal

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23882

Amount of Each Receipt this Period

250.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**B.** Jose A. Beguiristan

Mailing Address 289 Carabela Ct.

City State Zip Code  
 Coral Gables FL 33143

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
B-Line Apparel

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23874

Amount of Each Receipt this Period

250.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**C.** Stephen Bittel

Mailing Address 801 Arthur Godfrey Rd.

City State Zip Code  
 Miami Beach FL 33140

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Terranova Corporation

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23883

Amount of Each Receipt this Period

250.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

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

0.00

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

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

FOR LINE NUMBER: PAGE 77 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Arnold Cohen Mailing Address 500 Bayview Dr. City State Zip Code Sunny Isles FL 33160 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4200.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 3 / 2 0 0 6           </div> <b>Transaction ID:</b> C23928 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2100.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>B.</b> Full Name (Last, First, Middle Initial) Arnold Cohen Mailing Address 500 Bayview Dr. City State Zip Code Sunny Isles FL 33160 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4200.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 3 / 2 0 0 6           </div> <b>Transaction ID:</b> C23927 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1100.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>C.</b> Full Name (Last, First, Middle Initial) Alex De La Cruz Mailing Address 9500 S. Dadeland Blvd., #1 City State Zip Code Miami FL 33156 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation New Century Tobacco Group, LLC President & CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1750.00</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y              0 3 / 2 3 / 2 0 0 6           </div> <b>Transaction ID:</b> C23884 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">1750.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

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

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

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

FOR LINE NUMBER: PAGE 78 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Sanjiv Desai

Mailing Address 3790 Poinciana Ave.

City State Zip Code  
 Coconut Grove FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greenberg Traurig

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23885

Amount of Each Receipt this Period

500.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**B.** Charles Dusseau

Mailing Address 7520 SW 72 Court

City State Zip Code  
 Miami FL 33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
America Group

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23886

Amount of Each Receipt this Period

250.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**C.** Elsa Echavarria

Mailing Address 615 Ocean Dr.  
Apt. 6A

City State Zip Code  
 Key Biscayne FL 33149

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Painter

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23887

Amount of Each Receipt this Period

250.00

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

**[MEMO ITEM]**

\* Joint Fundraiser

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 79 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Moises Egozi Mailing Address 2 Grove Isle Dr. City Coconut Grove State FL Zip Code 33133 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-employed Occupation Businessman Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23888</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>B.</b> Full Name (Last, First, Middle Initial) Robert J. Friedman Mailing Address 5055 North Bay City Miami Beach State FL Zip Code 33140 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Holland & Knight Occupation Attorney / Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23889</b> Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>C.</b> Full Name (Last, First, Middle Initial) Leslie Genauer Mailing Address 641 Conde Ave. City Coral Gables State FL Zip Code 33156 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23890</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

Mailing Address 641 Conde Ave.

City State Zip Code  
Coral Gables FL 33156

FEC ID number of contributing federal political committee.

C

Name of Employer  
Karp & GenauerOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C23953

Amount of Each Receipt this Period

250.00

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

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Greenberg, Traurig, PA PAC

Mailing Address 1221 Brickell Ave.

City State Zip Code  
Miami FL 33131

FEC ID number of contributing federal political committee.

C

C00266585

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: C23892

Amount of Each Receipt this Period

250.00

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

[MEMO ITEM]

\* Joint Fundraiser

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

Mailing Address 9 Cayuga Rd.

City State Zip Code  
Sea Ranch Lakes FL 33308

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sally O'BriensOccupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C23893

Amount of Each Receipt this Period

500.00

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

[MEMO ITEM]

\* Joint Fundraiser

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 81 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Gerald Higier  
Mailing Address 1541 Sunset Dr. #300

City State Zip Code  
Miami FL 33143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SEC Commerical Realty Gro-  
up

Occupation  
Corporate Realtor

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

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: C23895

Amount of Each Receipt this Period

250.00

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

[MEMO ITEM]

\* Joint Fundraiser

**B.** Full Name (Last, First, Middle Initial)  
Christian Infante  
Mailing Address 3225 Bird Ave.

City State Zip Code  
Miami FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YMCA

Occupation  
Executive

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

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

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

Transaction ID: C23898

Amount of Each Receipt this Period

400.00

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

[MEMO ITEM]

\* Joint Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
Christian Infante  
Mailing Address 3225 Bird Ave.

City State Zip Code  
Miami FL 33133

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YMCA

Occupation  
Executive

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

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

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

Transaction ID: C23897

Amount of Each Receipt this Period

2100.00

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

[MEMO ITEM]

\* Joint Fundraiser

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

0.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 180

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Jose Infante, Jr.

Mailing Address 9789 NW 45th Ln.

City

Miami

State

FL

Zip Code

33178

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Florida Maintenance  
Services

Occupation  
President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23900

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**B.** Jose Infante, Jr.

Mailing Address 9789 NW 45th Ln.

City

Miami

State

FL

Zip Code

33178

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
South Florida Maintenance  
Services

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23899

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**C.** Lynn M. Johnson

Mailing Address 17971 NW 13th St.

City

Pembroke Pines

State

FL

Zip Code

33029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23902

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Lynn M. Johnson Mailing Address 17971 NW 13th St. City State Zip Code Pembroke Pines FL 33029 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23901</b> Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>B.</b> Full Name (Last, First, Middle Initial) Linda Kaplan Mailing Address 209 E. Hallandale Beach Blvd. City State Zip Code Hallandale Beach FL 33009 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Self Employed Ophthalmologist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23903</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>C.</b> Full Name (Last, First, Middle Initial) Dolores Karp Mailing Address 9325 Kerwood Court City State Zip Code Coral Gables FL 33156 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23904</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Joel Karp

Mailing Address 9325 Kerwood Court

City State Zip Code  
 Coral Gables FL 33156

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23905

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

B. Teresa Klaassen

Mailing Address 100 S. Pointe Dr., #3803

City State Zip Code  
 Miami Beach FL 33139

FEC ID number of contributing federal political committee.

C

Name of Employer  
Sunrise Senior LivingOccupation  
Administrator

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23907

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

C. Oscar Levin

Mailing Address 2489 Princeton Court

City State Zip Code  
 Weston FL 33327

FEC ID number of contributing federal political committee.

C

Name of Employer  
Greenberg Traurig LLPOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23908

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)

Stephen M. Lyon

Mailing Address 2863 SW 38th Ave.

City State Zip Code  
 Miami FL 33134

FEC ID number of contributing federal political committee.

C

Name of Employer  
IBMOccupation  
Business Development Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 3 / 2 0 0 6

Transaction ID: C23875

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

B. Full Name (Last, First, Middle Initial)

Elliot Melamed

Mailing Address 1930 Timberline Rd.

City State Zip Code  
 Weston FL 33327

FEC ID number of contributing federal political committee.

C

Name of Employer  
Melamed, Handy & KarpOccupation  
CPA

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23909

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

C. Full Name (Last, First, Middle Initial)

Fernando Neris

Mailing Address 143 Nandina Ter.

City State Zip Code  
 Winter Springs FL 32708

FEC ID number of contributing federal political committee.

C

Name of Employer  
Dorado Services, Inc.Occupation  
President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23912

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 180

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Fernando Neris		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  0 3 / 2 3 / 2 0 0 6 </div>
Mailing Address 143 Nandina Ter.		<b>Transaction ID:</b> C23910 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">2100.00</div>
City State Zip Code Winter Springs FL 32708		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>		
Name of Employer Occupation Dorado Services, Inc. President		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">2500.00</div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

<b>B.</b> Full Name (Last, First, Middle Initial) Jules Oaklander		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  0 3 / 2 3 / 2 0 0 6 </div>
Mailing Address 838 NW 183rd St.		<b>Transaction ID:</b> C23911 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>
City State Zip Code Miami FL 33169		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>		
Name of Employer Occupation Self Employed Physician		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

<b>C.</b> Full Name (Last, First, Middle Initial) Damian Pardo		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y  0 3 / 2 3 / 2 0 0 6 </div>
Mailing Address 421 NE 51st St.		<b>Transaction ID:</b> C23913 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>
City State Zip Code Miami FL 33137		
FEC ID number of contributing federal political committee. <div style="border: 1px solid black; padding: 2px; text-align: center;">C</div>		
Name of Employer Occupation SunTrust Banker		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Joel S. Perwin

Mailing Address 169 E. Flagler St.  
Suite 1422

City State Zip Code  
Miami FL 33131

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 13 / 2006

Transaction ID: C23876

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**B.** Howard Premer

Mailing Address 12000 Biscayne Blvd.  
Suite 705

City State Zip Code  
Miami FL 33181

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Institute for Pu-  
blic Safe

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 23 / 2006

Transaction ID: C23914

Amount of Each Receipt this Period

1500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

Full Name (Last, First, Middle Initial)

**C.** Lydia Prio-Touzet

Mailing Address 5400 Banyan Trail

City State Zip Code  
Coral Gables FL 33156

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 13 / 2006

Transaction ID: C23877

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Marco Rojas		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 290 Fernwood Rd.		<b>Transaction ID:</b> C23915
City Key Biscayne	State FL	Zip Code 33149
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 \* Joint Fundraiser

<b>B.</b> Full Name (Last, First, Middle Initial) Mark Schnapp		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 1900 Sunset Harbour Dr.		<b>Transaction ID:</b> C23916
City Miami	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Greenberg Traurig LLP	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 \* Joint Fundraiser

<b>C.</b> Full Name (Last, First, Middle Initial) Eunice Shriver		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address c/o Park Agency Inc. 330 Madison Ave.		<b>Transaction ID:</b> C23930
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Kennedy Foundation	Occupation Executive	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**  
 \* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 180

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Eunice Shriver Mailing Address c/o Park Agency Inc. 330 Madison Ave. City State Zip Code New York NY 10017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Kennedy Foundation Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2800.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23929</b> Amount of Each Receipt this Period 2100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>B.</b> Full Name (Last, First, Middle Initial) David Singer Mailing Address 1011 South Federal Highway City State Zip Code Hollywood FL 33020 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Singer, Farberman & Associates Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID: C23917</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser
<b>C.</b> Full Name (Last, First, Middle Initial) Glenn H. Singer Mailing Address 552 North Island Dr. City State Zip Code Golden Beach FL 33160 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-employed Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID: C23878</b> Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> * Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 180

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Slade

Mailing Address 10613 Gainsborough Rd.

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MWW GroupOccupation  
Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	6

Transaction ID: C23918

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**B.** Full Name (Last, First, Middle Initial)  
Southern Wine & Spirits PAC

Mailing Address 1600 NW 163rd St.

City State Zip Code  
Miami FL 33169

FEC ID number of contributing  
federal political committee.

C C00217877

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	6

Transaction ID: C23919

Amount of Each Receipt this Period

5000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**C.** Full Name (Last, First, Middle Initial)  
James Starr

Mailing Address PO Box 46

City State Zip Code  
Auburn AL 36831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
D&J EnterprisesOccupation  
Contractor

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	0	6

Transaction ID: C23922

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)

James Starr

Mailing Address PO Box 46

City State Zip Code  
 Auburn AL 36831

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
D&J Enterprises

Occupation  
Contractor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23920

Amount of Each Receipt this Period

2100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**B.** Full Name (Last, First, Middle Initial)

Mark Steinberg

Mailing Address 2907 Seminole St.

City State Zip Code  
 Miami FL 33133

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23921

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**C.** Full Name (Last, First, Middle Initial)

Mark H. Tanenbaum

Mailing Address 1504 Bay Rd.  
Apt. 3312

City State Zip Code  
 Miami Beach FL 33139

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 3 / 2 0 0 6

Transaction ID: C23923

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.**

Full Name (Last, First, Middle Initial)

Eberto Vitier

Mailing Address 6500 Riviera Dr.

City

Coral Gables

State

FL

Zip Code

33146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hibou Management LLC

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23924

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

**B.**

Full Name (Last, First, Middle Initial)

Allison B. Weiss

Mailing Address 1455 Ocean Dr.  
Apt. 1607

City

Miami Beach

State

FL

Zip Code

33139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-employed

Occupation  
Investor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 3 / 2 0 0 6

Transaction ID: C23879

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

**C.**

Full Name (Last, First, Middle Initial)

Diane N. Weiss

Mailing Address 1500 South Ocean Blvd.

City

Boca Raton

State

FL

Zip Code

33432

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23925

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

\* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.**

Full Name (Last, First, Middle Initial)

Randall Zomermaand

Mailing Address 105 S. Bermuda Ave.

City

Tampa

State

FL

Zip Code

33606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wellcare

Occupation

Vice President

Receipt For: 2006

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: C23926

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

\* Joint Fundraiser

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

40750.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

**A.** Full Name (Last, First, Middle Initial)  
Chubb Insurance  
Mailing Address P.O. Box 7247-0180

City State Zip Code  
Philadelphia PA 19170
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1601.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 7 / 2 0 0 6

Transaction ID: C23722

Amount of Each Receipt this Period

1005.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Vendor refund - Insurance

**B.** Full Name (Last, First, Middle Initial)  
Chubb Insurance  
Mailing Address P.O. Box 7247-0180

City State Zip Code  
Philadelphia PA 19170
FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1601.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: C23872

Amount of Each Receipt this Period

596.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Vendor refund - Insurance

SUBTOTAL of Receipts This Page (optional) .....

1601.00

TOTAL This Period (last page this line number only) .....

1601.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 9 / 2 0 0 6
Mailing Address 111 Westminster St.		<b>Transaction ID:</b> C23723
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.48
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1875.59	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 111 Westminster St.		<b>Transaction ID:</b> C23724
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 53.02
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1875.59	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 0 / 2 0 0 6
Mailing Address 111 Westminster St.		<b>Transaction ID:</b> C23725
City Providence	State RI	Zip Code 02903-2305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 33.46
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1875.59	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

**SUBTOTAL** of Receipts This Page (optional) .....

146.96

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	1		2	0	0	6													
Mailing Address 601 Washington St.		<b>Transaction ID:</b> C23727																				
City State Zip Code Stoughton MA 02072		Amount of Each Receipt this Period 1777.68																				
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest																				
Name of Employer	Occupation																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 18702.55																					

<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	1		2	0	0	6													
Mailing Address 601 Washington St.		<b>Transaction ID:</b> C23726																				
City State Zip Code Stoughton MA 02072		Amount of Each Receipt this Period 394.13																				
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest																				
Name of Employer	Occupation																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 18702.55																					

<b>C.</b> Full Name (Last, First, Middle Initial) Citizens Bank		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
0	2		0	9		2	0	0	6													
Mailing Address 601 Washington St.		<b>Transaction ID:</b> C23728																				
City State Zip Code Stoughton MA 02072		Amount of Each Receipt this Period 1629.70																				
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest																				
Name of Employer	Occupation																					
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 18702.55																					

**SUBTOTAL** of Receipts This Page (optional) .....

3801.51

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 180

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

<b>A.</b> Full Name (Last, First, Middle Initial) Citizens Bank Mailing Address 601 Washington St. City Stoughton State MA Zip Code 02072 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 18702.55		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6 <b>Transaction ID: C23729</b> Amount of Each Receipt this Period 395.36 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank Mailing Address 601 Washington St. City Stoughton State MA Zip Code 02072 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 18702.55		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 9 / 2 0 0 6 <b>Transaction ID: C23730</b> Amount of Each Receipt this Period 1572.92 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest

SUBTOTAL of Receipts This Page (optional) .....

1968.28

TOTAL This Period (last page this line number only) .....

5916.75

# **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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. American Express Merchant Services**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8575**

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

4.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. American Express Merchant Services**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8576**

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

87.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. American Express Merchant Services**

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8462**

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

30.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

122.52

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8305

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

252.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8328

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

5250.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8362

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

30580.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

36083.52

**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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

007

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8449

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2449.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3640.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. ASAP Printing & Graphics**

Mailing Address 2805 Mount Vernon Ave.

City Alexandria State VA Zip Code 22301

Purpose of Disbursement  
Printing

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3595.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

9685.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Salvine Barone

Mailing Address 80 Meridian St.

City  
Providence

State  
RI

Zip Code  
02908

Purpose of Disbursement

Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8295**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Broadway of Chicago

Mailing Address 17 North State St.  
Suite 810

City  
Chicago

State  
IL

Zip Code  
60602

Purpose of Disbursement

Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8463**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

4350.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Russell Budd

Mailing Address 3102 Oak Lawn Ave.

City  
Dallas

State  
TX

Zip Code  
75219

Purpose of Disbursement

Void check issued prior period

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8477**

Date of Disbursement

03 / 03 / 2006

Amount of Each Disbursement this Period

-1417.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3432.58

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 102 / 180

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Russell Budd

Mailing Address 3102 Oak Lawn Ave.

City  
DallasState  
TXZip Code  
75219

Purpose of Disbursement

Reception cost

Candidate Name

  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8478**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

1417.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North KingstownState  
RIZip Code  
02852

Purpose of Disbursement

Travel

Candidate Name

  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8278**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	3	/	2	0	0	6

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North KingstownState  
RIZip Code  
02852

Purpose of Disbursement

Wages

Candidate Name

  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8294**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**SUBTOTAL** of Disbursements This Page (optional) .....

1826.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North Kingstown

State  
RI

Zip Code  
02852

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8332**

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North Kingstown

State  
RI

Zip Code  
02852

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8379**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

38.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North Kingstown

State  
RI

Zip Code  
02852

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8386**

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

795.94

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North KingstownState  
RIZip Code  
02852Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8398**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	8	/	2	0	0	6

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North KingstownState  
RIZip Code  
02852Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8494**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	6

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North KingstownState  
RIZip Code  
02852Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8502**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	6

Amount of Each Disbursement this Period

31.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional) .....

788.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City  
North Kingstown

State  
RI

Zip Code  
02852

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8579**

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

378.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Cafe Nuovo

Mailing Address 1 Citizens Plaza

City  
Providence

State  
RI

Zip Code  
02903

Purpose of Disbursement  
Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8303**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Cape Cod Framery

Mailing Address 10 Echo Rd.

City  
Mashpee

State  
MA

Zip Code  
02649

Purpose of Disbursement  
Photos

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8320**

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

157.11

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4536.08

**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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Cape Cod Framery**

Mailing Address 10 Echo Rd.

City  
Mashpee

State  
MA

Zip Code  
02649

Purpose of Disbursement  
Photos

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8455

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

202.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Care First Blue Cross Blue Shield**

Mailing Address P.O. Box 79749

City  
Baltimore

State  
MD

Zip Code  
21279

Purpose of Disbursement  
Health Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8304

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

747.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Care First Blue Cross Blue Shield**

Mailing Address P.O. Box 79749

City  
Baltimore

State  
MD

Zip Code  
21279

Purpose of Disbursement  
Health Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8446

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

498.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1447.57

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Care First Blue Cross Blue Shield

Mailing Address P.O. Box 79749

City  
Baltimore

State  
MD

Zip Code  
21279

Purpose of Disbursement  
Health Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8488**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

498.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Carlone's Florist

Mailing Address 16 Dexter St.

City  
Portsmouth

State  
RI

Zip Code  
02871

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8297**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

164.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Chubb Insurance

Mailing Address P.O. Box 7247-0180

City  
Philadelphia

State  
PA

Zip Code  
19170

Purpose of Disbursement  
Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8302**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

4226.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4888.78

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Chubb Insurance**

Mailing Address P.O. Box 7247-0180

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Insurance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8392

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

596.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Cingular Wireless**

Mailing Address P.O. Box 828435

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8301

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

62.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Cingular Wireless**

Mailing Address P.O. Box 828435

City Philadelphia State PA Zip Code 19182

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8390

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

57.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

716.39

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Cingular Wireless**

Mailing Address P.O. Box 828435

City  
Philadelphia

State  
PA

Zip Code  
19182

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8489

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

62.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Citizens Bank**

Mailing Address 601 Washington St.

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8282

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

2641.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Citizens Bank**

Mailing Address 601 Washington St.

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8286

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

34.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

2738.31

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Citizens Bank

Mailing Address 601 Washington St.

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8371**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

4754.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Citizens Bank

Mailing Address 601 Washington St.

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8452**

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

2576.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Citizens Bank

Mailing Address 601 Washington St.

City  
Stoughton

State  
MA

Zip Code  
02072

Purpose of Disbursement  
Service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8479**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

20.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

7351.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City  
Providence

State  
RI

Zip Code  
02906

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8306**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

320.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City  
Providence

State  
RI

Zip Code  
02906

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8377**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

117.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Clarke Flower Shops Inc.

Mailing Address 398 Hope St.

City  
Providence

State  
RI

Zip Code  
02906

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8487**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

91.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

530.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Covad Communications**

Mailing Address P.O. Box 39000  
Dept. 33408

City San Francisco State CA Zip Code 94139

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8309**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

74.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Covad Communications**

Mailing Address P.O. Box 39000  
Dept. 33408

City San Francisco State CA Zip Code 94139

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8365**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

74.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Covad Communications**

Mailing Address P.O. Box 39000  
Dept. 33408

City San Francisco State CA Zip Code 94139

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8486**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

74.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

223.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** DC Arena LP

Mailing Address 601 F St. NW

City  
Washington

State  
DC

Zip Code  
20004

Purpose of Disbursement

Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8389**

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

16000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** District of Columbia

Mailing Address P.O. Box 7792  
Ben Franklin Station

City  
Washington

State  
DC

Zip Code  
20044

Purpose of Disbursement

Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8283**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

505.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** District of Columbia

Mailing Address P.O. Box 7792  
Ben Franklin Station

City  
Washington

State  
DC

Zip Code  
20044

Purpose of Disbursement

Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8372**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

977.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

17482.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. District of Columbia**

Mailing Address P.O. Box 7792  
Ben Franklin Station

City Washington State DC Zip Code 20044

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8454

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

438.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. East Greenwich Photo & Studio**

Mailing Address 631 Main St.

City East Greenwich State RI Zip Code 02818

Purpose of Disbursement  
Photos

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8369

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

1093.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. ETS**

Mailing Address 10 Pidgeon Hill Dr.  
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8273

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1561.27

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** ETS

Mailing Address 10 Pidgeon Hill Dr.  
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8272**

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** ETS

Mailing Address 10 Pidgeon Hill Dr.  
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8573**

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** ETS

Mailing Address 10 Pidgeon Hill Dr.  
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8572**

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A. ETS**

Mailing Address 10 Pidgeon Hill Dr.  
Suite 200

City Sterling State VA Zip Code 20165

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8461**

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Federal Express**

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8280**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

9.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Federal Express**

Mailing Address P.O. Box 360353

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8307**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

12.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

52.01

**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:  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8300**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

11.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8308**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

17.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8325**

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

16.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

45.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8378**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

36.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8367**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

29.78

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8450**

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

32.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

98.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8469**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

8.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8500**

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

56.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O. Box 360353

City  
Pittsburgh

State  
PA

Zip Code  
15250

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8583**

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

8.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

73.87

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8293**

Date of Disbursement

01 / 13 / 2006

Amount of Each Disbursement this Period

701.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8331**

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

701.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8385**

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

706.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

2109.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8448**

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

11.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8397**

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

706.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8493**

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

706.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1424.02

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8587**

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

246.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Francesca E. Gage

Mailing Address 1825 Vernon St. NW Apt. 46

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8580**

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

706.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Hagerstown Trust

Mailing Address 83 West Washington St.

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8274**

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

5.03

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

957.54

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Hagerstown Trust

Mailing Address 83 West Washington St.

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8275**

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

8.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Hagerstown Trust

Mailing Address 83 West Washington St.

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8568**

Date of Disbursement

01 / 12 / 2006

Amount of Each Disbursement this Period

8.71

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Hagerstown Trust

Mailing Address 83 West Washington St.

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement

Service charge

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8574**

Date of Disbursement

02 / 10 / 2006

Amount of Each Disbursement this Period

8.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

26.17

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Harvard Club of Boston

Mailing Address 374 Commonwealth Ave.

City  
Boston

State  
MA

Zip Code  
02215

Purpose of Disbursement

Reception cost

Candidate Name

007

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8585**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6137.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Institute for Labor Studies

Mailing Address 99 Bald Hill Rd.

City  
Cranston

State  
RI

Zip Code  
02920

Purpose of Disbursement

Advertisement

Candidate Name

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8439**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Jewish Family Services

Mailing Address 229 Waterman St.

City  
Providence

State  
RI

Zip Code  
02906

Purpose of Disbursement

Advertisement

Candidate Name

004

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

**Transaction ID: D8441**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

6937.19

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Kieloch Consulting

Mailing Address 400 C. St. NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Office rent

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8276

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	2	/	2	0	0	6

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Kieloch Consulting

Mailing Address 400 C. St. NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Office rent

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8360

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Kieloch Consulting

Mailing Address 400 C. St. NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Utilities

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8451

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	7	/	2	0	0	6

Amount of Each Disbursement this Period

78.41

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1278.41

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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Kieloch Consulting

Mailing Address 400 C. St. NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
Office rent

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8460**

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** MCI Worldcom

Mailing Address P.O. Box 856053

City  
Louisville

State  
KY

Zip Code  
40285

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8281**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

199.81

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** MCI Worldcom

Mailing Address P.O. Box 856053

City  
Louisville

State  
KY

Zip Code  
40285

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8368**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

144.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

944.20

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** MCI Worldcom

Mailing Address P.O. Box 856053

City  
Louisville

State  
KY

Zip Code  
40285

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8464**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

210.96

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Mental Health Association of RI

Mailing Address 500 Prospect St.

City  
Pawtucket

State  
RI

Zip Code  
02860

Purpose of Disbursement  
Advertisement

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8473**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Morin's Inc.

Mailing Address 95 Frank Mossberg Dr.

City  
South Attleboro

State  
MA

Zip Code  
02703

Purpose of Disbursement  
Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8321**

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

198.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

534.03

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Morin's Inc.

Mailing Address 95 Frank Mossberg Dr.

City South Attleboro State MA Zip Code 02703

Purpose of Disbursement

Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8380**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

6191.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** National Prayer Breakfast

Mailing Address International Foundation  
P.O. Box 23813

City Washington State DC Zip Code 20026

Purpose of Disbursement

Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8290**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** NGP Software

Mailing Address 5039 Connecticut Ave. NW  
Suite 1A

City Washington State DC Zip Code 20008

Purpose of Disbursement

Computer software

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8586**

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

450.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

6941.38

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** O-N Radio, Inc.

Mailing Address 1 Social St.

City Woonsocket State RI Zip Code 02895

Purpose of Disbursement

Advertisement

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8443**

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Postmaster

Mailing Address 1400 L St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8466**

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

434.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Postmaster

Mailing Address 15 Wall St.

City Foxboro State MA Zip Code 02035

Purpose of Disbursement

Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8480**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

78.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

612.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Postmaster

Mailing Address 90 Power Rd.

City  
Pawtucket

State  
RI

Zip Code  
02860

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8584**

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

80.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8292**

Date of Disbursement

01 / 13 / 2006

Amount of Each Disbursement this Period

1618.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8329**

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

3391.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

5089.68

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8330

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

1618.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8384

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

1639.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8396

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

1639.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4896.72

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Travel

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8472

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

89.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8492

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

1639.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8588

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1778.23

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Michael J. Pratt

Mailing Address 926 Westminster St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8578

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	6

Amount of Each Disbursement this Period

1639.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Providence Newspaper Guild

Mailing Address 270 Westminster St. 2nd Fl.

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Advertisement

Candidate Name

004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8317

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	0	6

Amount of Each Disbursement this Period

550.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Providence Newspaper Guild

Mailing Address 270 Westminster St. 2nd Fl.

City Providence State RI Zip Code 02903

Purpose of Disbursement  
Advertisement

Candidate Name

004  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8370

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

2489.23

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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Rhode Island Veterans Action Center**

Mailing Address 626 Park Ave.

City  
Cranston

State  
RI

Zip Code  
02910

Purpose of Disbursement  
Advertisement

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8445

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

365.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. RI Dept. of Employment &**

Mailing Address Training  
One Capitol Hill Suite 36

City  
Providence

State  
RI

Zip Code  
02908

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8288

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

357.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Ryan, Phillips, Utrecht &**

Mailing Address MacKinnon  
1133 Connecticut Ave. NW #300

City  
Washington

State  
DC

Zip Code  
20036

Purpose of Disbursement  
Professional services - Legal

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8495

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

1192.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1914.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Slater Mill Historic Site**

Mailing Address P.O. Box 696

City  
Pawtucket

State  
RI

Zip Code  
02862

Purpose of Disbursement

Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8296

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Sonia Cleaning Service**

Mailing Address 121501 Jennell Dr.

City  
Bristow

State  
VA

Zip Code  
20136

Purpose of Disbursement

Office expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8323

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

22.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Sonia Cleaning Service**

Mailing Address 121501 Jennell Dr.

City  
Bristow

State  
VA

Zip Code  
20136

Purpose of Disbursement

Office expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8374

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

22.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

645.72

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City  
Bristow

State  
VA

Zip Code  
20136

Purpose of Disbursement  
Office expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8400

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

22.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City  
Bristow

State  
VA

Zip Code  
20136

Purpose of Disbursement  
Office expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8476

Date of Disbursement

03 / 06 / 2006

Amount of Each Disbursement this Period

22.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Sonia Cleaning Service

Mailing Address 121501 Jennell Dr.

City  
Bristow

State  
VA

Zip Code  
20136

Purpose of Disbursement  
Office expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** D8501

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

22.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

68.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** State of Rhode Island

Mailing Address Division of Taxation  
One Capitol Hill

City State Zip Code  
Providence RI 02908

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8285**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

36.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** State of Rhode Island

Mailing Address Division of Taxation  
One Capitol Hill

City State Zip Code  
Providence RI 02908

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8373**

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

36.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** State of Rhode Island

Mailing Address Division of Taxation  
One Capitol Hill

City State Zip Code  
Providence RI 02908

Purpose of Disbursement  
2005 RI-1120

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8395**

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

572.20

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. State of Rhode Island**

Mailing Address Division of Taxation  
One Capitol Hill

City State Zip Code  
Providence RI 02908

Purpose of Disbursement  
Payroll taxes/withholdings

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8453

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

36.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Towne House Flowers**

Mailing Address 2555 Hartford Ave.

City State Zip Code  
Johnston RI 02919

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8393

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

319.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City State Zip Code  
Philadelphia PA 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8279

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

24.19

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

380.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8326

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

25.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8570

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

25.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8569

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

27.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

77.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8447

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

27.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8482

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

25.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. United Parcel Service**

Mailing Address P.O. Box 7247-0244

City Philadelphia State PA Zip Code 19170

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8582

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

51.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

104.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement  
Professional services-Accounting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8289**

Date of Disbursement

01 / 03 / 2006

Amount of Each Disbursement this Period

7000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement  
Professional services-Accounting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8361**

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

7000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement  
Professional services-Accounting

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8459**

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

7092.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

21092.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8299

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

53.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8298

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

84.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8364

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

405.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

543.93

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8366

Date of Disbursement

02 / 06 / 2006

Amount of Each Disbursement this Period

53.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8381

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

66.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Verizon Wireless**

Mailing Address P.O. Box 41556

City Philadelphia State PA Zip Code 19101

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8388

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

76.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

196.47

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 41556

City  
Philadelphia

State  
PA

Zip Code  
19101

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8485**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

53.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 41556

City  
Philadelphia

State  
PA

Zip Code  
19101

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8484**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

56.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Verizon Wireless**

Mailing Address P.O. Box 41556

City  
Philadelphia

State  
PA

Zip Code  
19101

Purpose of Disbursement  
Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8499**

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

80.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

190.21

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8319**

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

79.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8327**

Date of Disbursement

01 / 30 / 2006

Amount of Each Disbursement this Period

182.41

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8391**

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

86.18

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

348.18

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8387**

Date of Disbursement

02 / 20 / 2006

Amount of Each Disbursement this Period

223.39

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8497**

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

80.16

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Verizon

Mailing Address P.O. Box 28007

City State Zip Code  
 Lehigh Valley PA 18002

Purpose of Disbursement

Telephone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8498**

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

194.52

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

498.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Westhill Partners**

Mailing Address 60 Broad St. 29th Fl.

City  
New York

State  
NY

Zip Code  
10004

Purpose of Disbursement  
Consultant-Research

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8571

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

7500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. George Zainyeh**

Mailing Address 433 Seaside Dr.

City  
Jamestown

State  
RI

Zip Code  
02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8291

Date of Disbursement

01 / 13 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. George Zainyeh**

Mailing Address 433 Seaside Dr.

City  
Jamestown

State  
RI

Zip Code  
02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8333

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

8744.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8383**

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8399**

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** George Zainyeh

Mailing Address 433 Seaside Dr.

City Jamestown State RI Zip Code 02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8491**

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1867.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** George Zainyeh

Mailing Address 433 Seaside Dr.

City  
Jamestown

State  
RI

Zip Code  
02835

Purpose of Disbursement  
Wages

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8581**

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

622.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** American Express

Mailing Address P.O. Box 1270

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8310**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

7250.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** All Resort Express

Mailing Address P.O. Box 681780

City  
Park City

State  
UT

Zip Code  
84068

Purpose of Disbursement  
Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8344**

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

323.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

7872.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Drake Hotel

Mailing Address 140 East Walton Pl.

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8354

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

575.43

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Drake Hotel

Mailing Address 140 East Walton Pl.

City Chicago State IL Zip Code 60611

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8359

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

495.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Marriott Hotel

Mailing Address 3299 K St. NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8343

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

403.61

☐ 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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Park City Mountain Resort

Mailing Address 1310 Lowell Ave.

City State Zip Code  
Park City UT 84068

Purpose of Disbursement

Reception cost

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8345

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

1014.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Staples

Mailing Address 1007 Ten Rod Rd.

City State Zip Code  
North Kingstown RI 02852

Purpose of Disbursement

Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8347

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

17.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Staples

Mailing Address 1007 Ten Rod Rd.

City State Zip Code  
North Kingstown RI 02852

Purpose of Disbursement

Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8348

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

31.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Utah Olympic Park**

Mailing Address 3000 Bear Hollow Dr.

City State Zip Code  
Park City UT 84066

Purpose of Disbursement

Reception cost

Candidate Name

007

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8342

Date of Disbursement

01 / 16 / 2006

Amount of Each Disbursement this Period

4000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address P.O. Box 1270

City State Zip Code  
Newark NJ 07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8322

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

30.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. American Express**

Mailing Address P.O. Box 1270

City State Zip Code  
Newark NJ 07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8324

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

27.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

57.94

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A. Park City Mountain Resort**

Mailing Address 1310 Lowell Ave.

City  
Park CityState  
UTZip Code  
84068

Purpose of Disbursement

Reception cost

Candidate Name

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: D8353

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	3	/	2	0	0	6

Amount of Each Disbursement this Period

27.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Express**

Mailing Address P.O. Box 1270

City  
NewarkState  
NJZip Code  
07101

Purpose of Disbursement

Credit Card - See Below if Itemized

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: D8375

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

172.27

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C. Marriott**

Mailing Address 32 Exchange Ter.

City  
ProvidenceState  
RIZip Code  
02903

Purpose of Disbursement

Travel

Candidate Name

002

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: D8376

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	0	6

Amount of Each Disbursement this Period

172.27

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53
**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

172.27

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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. American Express**

Mailing Address P.O. Box 1270

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8382

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

924.97

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City  
Fort Worth

State  
TX

Zip Code  
76155

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8424

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

353.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City  
Fort Worth

State  
TX

Zip Code  
76155

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8423

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

706.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

924.97

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Carroll Travel**

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8414

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Carroll Travel**

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8420

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Chili's Grill**

Mailing Address 255 Collyer St.

City North Providence State RI Zip Code 02904

Purpose of Disbursement

Meeting expense

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8434

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

50.34

☐ 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  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Citgo

Mailing Address 105 Broadway

City  
NewportState  
RIZip Code  
02840Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8427

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	6

Amount of Each Disbursement this Period

32.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Cumberland Farms

Mailing Address 1812 E Main Rd.

City  
PortsmouthState  
RIZip Code  
02871Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8429

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	6

Amount of Each Disbursement this Period

4.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Hauser Chocolatier

Mailing Address 59 Tom Harvey Rd.

City  
WesterlyState  
RIZip Code  
02891Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8401

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	3		2	0	0	6

Amount of Each Disbursement this Period

891.07

☐ 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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Marriott

Mailing Address 1201 Market St.

City  
Philadelphia

State  
PA

Zip Code  
19107

Purpose of Disbursement  
Travel credit

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8435**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

-291.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Park City Mountain Resort

Mailing Address 1310 Lowell Ave.

City  
Park City

State  
UT

Zip Code  
84068

Purpose of Disbursement  
Reception cost credit

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8433**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

-3148.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Postmaster

Mailing Address 1400 L St. SE

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8415**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

156.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Postmaster**

Mailing Address 90 Power Rd.

City Pawtucket State RI Zip Code 02860

Purpose of Disbursement

Postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8411

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

8.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Providence Picture Frame**

Mailing Address 24 Branch Ave.

City Providence State RI Zip Code 02903

Purpose of Disbursement

Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8402

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

466.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Shell**

Mailing Address 207 East Main Rd.

City Middletown State RI Zip Code 02842

Purpose of Disbursement

Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8428

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

40.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Shell

Mailing Address 71 Cedar St.

City  
Pawtucket

State  
RI

Zip Code  
02860

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8405**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

29.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Shell

Mailing Address 3319 Post Rd.

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8418**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

38.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Southwest Airlines

Mailing Address P.O. Box 36611

City  
Dallas

State  
TX

Zip Code  
75235

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8419**

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

177.10

☐ 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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Southwest Airlines**

Mailing Address P.O. Box 36611

City Dallas State TX Zip Code 75235

Purpose of Disbursement

Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8413

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

254.20

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. Staples**

Mailing Address 1025 Wayne Ave.

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement

Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8416

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

56.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Staples**

Mailing Address 1025 Wayne Ave.

City Chambersburg State PA Zip Code 17201

Purpose of Disbursement

Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8421

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

103.27

☐ 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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Verio Web Hosting**

Mailing Address 1800 Old Okeechobee Rd.

City State Zip Code  
West Palm Beach FL 33409

Purpose of Disbursement  
Website

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8409

Date of Disbursement

02 / 13 / 2006

Amount of Each Disbursement this Period

99.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address P.O. Box 1270

City State Zip Code  
Newark NJ 07101

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8436

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

1215.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Lucky Strike**

Mailing Address 701 Seventh St. NW

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8437

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

1215.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

1215.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** American Express

Mailing Address P.O. Box 1270

City  
NewarkState  
NJZip Code  
07101Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8467

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	6

Amount of Each Disbursement this Period

49.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** American Express

Mailing Address P.O. Box 1270

City  
NewarkState  
NJZip Code  
07101Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8490

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

9340.96

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** American Airlines

Mailing Address 4255 Amon Carter Blvd.

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8532

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

171.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

9390.81

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
Travel

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8535

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

283.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. American Airlines**

Mailing Address 4255 Amon Carter Blvd.

City  
Fort WorthState  
TXZip Code  
76155Purpose of Disbursement  
Travel

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8546

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

313.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 110 N. Carolina Ave. SE

City  
WashingtonState  
DCZip Code  
20003Purpose of Disbursement  
Travel

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8551

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

79.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Cafe Nuovo

Mailing Address 1 Citizens Plaza

City  
ProvidenceState  
RIZip Code  
02903Purpose of Disbursement  
Meeting expense

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8547

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

323.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Carey Limousine

Mailing Address P.O. Box 631414

City  
BaltimoreState  
MDZip Code  
21263Purpose of Disbursement  
Travel

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8509

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

175.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City  
WashingtonState  
DCZip Code  
20002Purpose of Disbursement  
Service charge

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8555

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8537

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

90.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8550

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Service charge

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8564

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Chili's Grill

Mailing Address 255 Collyer St.

City  
North Providence

State  
RI

Zip Code  
02904

Purpose of Disbursement  
Meeting expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8528**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

44.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Citgo

Mailing Address 105 Broadway

City  
Newport

State  
RI

Zip Code  
02840

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8539**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

6.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Cumberland Farms

Mailing Address 1812 E Main Rd.

City  
Portsmouth

State  
RI

Zip Code  
02871

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8542**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

22.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A. Cumberland Farms**

Mailing Address 1812 E Main Rd.

City  
PortsmouthState  
RIZip Code  
02871Purpose of Disbursement  
Gasoline

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8529

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

37.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Dell Direct**

Mailing Address 8801 Research Blvd.

City  
AustinState  
TXZip Code  
78758Purpose of Disbursement  
Computer

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8519

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

2259.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Gregg's Restaurant**

Mailing Address 1303 N. Main St.

City  
ProvidenceState  
RIZip Code  
02904Purpose of Disbursement  
Meeting expense

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8520

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	6

Amount of Each Disbursement this Period

28.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Hertz Car Rental

Mailing Address 19501 N Airport Way

City	State	Zip Code
Santa Ana	CA	92707

Purpose of Disbursement  
Travel

Candidate Name

002
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8522

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

546.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Hyatt Hotel

Mailing Address 1107 Jamboree Rd.

City	State	Zip Code
Newport Beach	CA	92660

Purpose of Disbursement  
Travel

Candidate Name

002
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8516

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

201.08

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Hyatt Hotel

Mailing Address 1107 Jamboree Rd.

City	State	Zip Code
Newport Beach	CA	92660

Purpose of Disbursement  
Travel

Candidate Name

002
Category/ Type

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8517

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

240.75

☐ 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**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Hyatt Hotel

Mailing Address 1107 Jamboree Rd.

City  
Newport Beach

State  
CA

Zip Code  
92660

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8518**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

289.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Hyatt Hotel

Mailing Address 1 Market Pl.

City  
San Diego

State  
CA

Zip Code  
92101

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8525**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

759.42

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Hyatt Hotel

Mailing Address 1 Market Pl.

City  
San Diego

State  
CA

Zip Code  
92101

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8526**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

449.38

☐ 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  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Il Buco

Mailing Address 47 Bond St.

City  
New York

State  
NY

Zip Code  
10012

Purpose of Disbursement  
Reception cost

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8554

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

690.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B.** National Democratic Club

Mailing Address 30 Ivy St.

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Meeting expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8530

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

19.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C.** Park City Mountain Resort

Mailing Address 1310 Lowell Ave.

City  
Park City

State  
UT

Zip Code  
84068

Purpose of Disbursement  
Reception cost credit

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8504

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

-950.11

☐ 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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Shell

Mailing Address 207 East Main Rd.

City  
Middletown

State  
RI

Zip Code  
02842

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8559**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

27.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Shell

Mailing Address 207 East Main Rd.

City  
Middletown

State  
RI

Zip Code  
02842

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8510**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

31.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Shell

Mailing Address 207 East Main Rd.

City  
Middletown

State  
RI

Zip Code  
02842

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8538**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

31.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Shell

Mailing Address 3319 Post Rd.

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8553**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

26.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Shell

Mailing Address 3319 Post Rd.

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8561**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

33.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Shell

Mailing Address 207 East Main Rd.

City  
Middletown

State  
RI

Zip Code  
02842

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8557**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

26.30

☐ 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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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Shell

Mailing Address 3319 Post Rd.

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8536**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

26.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B.** Shell

Mailing Address 3319 Post Rd.

City  
Warwick

State  
RI

Zip Code  
02886

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8508**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

39.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.** Shell

Mailing Address 2525 East Main Rd.

City  
Portsmouth

State  
RI

Zip Code  
02871

Purpose of Disbursement  
Gasoline

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID: D8511**

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

38.75

☐ 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**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. US Airways**

Mailing Address Crystal Park 4  
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8556

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

314.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. US Airways**

Mailing Address Crystal Park 4  
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8563

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

539.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. US Airways**

Mailing Address Crystal Park 4  
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8534

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

138.80

☐ 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)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. US Airways**

Mailing Address Crystal Park 4  
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8552

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

289.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. US Airways**

Mailing Address Crystal Park 4  
3345 Crystal Dr.

City Arlington State VA Zip Code 22227

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8545

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

314.80

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **C. Verio Web Hosting**

Mailing Address 1800 Old Okeechobee Rd.

City West Palm Beach State FL Zip Code 33409

Purpose of Disbursement  
Website

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8513

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

99.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Washington Court Hotel**

Mailing Address 525 New Jersey Ave. NE

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Constituent expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8506

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

344.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

## **B. American Express**

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement  
Credit Card - See Below if Itemized

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8496

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

769.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Hyatt Hotel**

Mailing Address 1 Market Pl.

City San Diego State CA Zip Code 92101

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8565

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

248.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) .....

769.21

**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)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Regency Hotel

Mailing Address 540 Park Ave. at 61st St.

City  
New York

State  
NY

Zip Code  
10021

Purpose of Disbursement  
Travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8567

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	6

Amount of Each Disbursement this Period

520.58

☐ 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) .....

188237.26

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Mooretown Rancheria

Mailing Address 1 Alverda Dr.

City  
Oroville

State  
CA

Zip Code  
95966

Purpose of Disbursement  
Refund of contribution

Candidate Name

010  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: D8311

Date of Disbursement

MM / DD / YYYY  
01 / 18 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

500.00

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

## **A. Democratic Congressional Campaign Committee**

Mailing Address 430 South Capitol Street

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Transfer to a National Political Party

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8590**

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

15000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Gymnasium Fundraising Committee**

Mailing Address 29 Middle Rd.

City  
Portsmouth

State  
RI

Zip Code  
02871

Purpose of Disbursement  
Donation

Candidate Name

012  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: D8315**

Date of Disbursement

01 / 23 / 2006

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Harold Ford Jr. For Tennessee**

Mailing Address 5120 Barry Rd.  
Suite 1300

City  
Memphis

State  
TN

Zip Code  
38117

Purpose of Disbursement  
2006 TN-S--Primary

Candidate Name  
Harold Ford Jr.

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: TN District:

**Transaction ID: D8458**

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

17250.00

**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 Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

**A.** Harold Ford Jr. For Tennessee

Mailing Address 5120 Barry Rd.  
Suite 1300

City Memphis State TN Zip Code 38117

Purpose of Disbursement  
2006 TN-S--General

Candidate Name  
Harold Ford Jr.

011  
Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: TN District:

Transaction ID: D8457

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Jim Davis for Governor

Mailing Address P.O. Box 10399

City Tampa State FL Zip Code 33679

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8589

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Rhode Island State Democratic Committee

Mailing Address P.O. Box 6004

City Providence State RI Zip Code 02940

Purpose of Disbursement  
Transfer to a Party Committee

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: D8591

Date of Disbursement

03 / 31 / 2006

Amount of Each Disbursement this Period

2000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

21750.00