

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 45

(check only one)

|   |                              |                              |   |
|---|------------------------------|------------------------------|---|
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13             | <input type="checkbox"/> 14  | <input type="checkbox"/> 15  | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
Narragansett Bay PAC

**A.**

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

Mailing Address 867 Drift Rd

City State Zip Code  
Westport MA 02790-1237

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

Name of Employer Occupation  
Mikel executive

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 7 / 2 0 0 9

Transaction ID: C5557534

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Lawrence F. O'Brien, III

Mailing Address 3410 Q St NW

City State Zip Code  
Washington DC 20007-2718

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

Name of Employer Occupation  
O'Brien and Calio Attorney at Law

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: C5557516

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
William Oldaker

Mailing Address 11001 Piney Meetinghouse Rd

City State Zip Code  
Potomac MD 20854-1312

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

Name of Employer Occupation  
Oldaker, Biden and Belair attorney

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 2 8 / 2 0 0 9

Transaction ID: C5557517

Amount of Each Receipt this Period

1000.00

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

3000.00

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