

**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

2007

through

03

31

2007

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

Type or Print Name of Treasurer

William San Bento, Jr.

Signature of Treasurer

Electronically Filed by William San Bento, Jr.

Date

06

05

2007

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 7

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	177434.51	198669.51
(b) Total Contribution Refunds (from Line 20(d)).....	250.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	177184.51	196669.51
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	192145.22	275339.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	31.13	2342.31
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	192114.09	272996.71
8. Cash on Hand at Close of Reporting Period (from Line 27).....	534379.97	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

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 7

To:

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

I. RECEIPTS

COLUMN A
Total This PeriodCOLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than
Political Committees

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

139347.00

154097.00

(ii) Unitemized.....

1080.00

1415.00

(iii) TOTAL of contributions

from individuals..... ▶

140427.00

155512.00

(b) Political Party Committees.....

7.51

7.51

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

37000.00

43150.00

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS
(other than loans)

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

177434.51

198669.51

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS
(add Lines 13(a) and (b)).....

0.00

0.00

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

31.13

2342.31

15. OTHER RECEIPTS

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

4162.17

7617.62

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

181627.81

208629.44

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.....	192145.22	275339.02
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	250.00	2000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	250.00	2000.00
21. OTHER DISBURSEMENTS.....	11250.00	61500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	203645.22	338839.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	556397.38
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	181627.81
25. SUBTOTAL (add Line 23 and Line 24).....	738025.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	203645.22
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	534379.97

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

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

FOR LINE NUMBER: PAGE 5 / 183

(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)

Ian A. Adler

Mailing Address 155 Park St. #415

City State Zip Code
 New York NY 10014

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32952

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)

Gary A. Agron

Mailing Address 5445 DTC Parkway
Suite 520

City State Zip Code
 Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Attorney

Receipt For: 2008

☒ 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 7

Transaction ID: C32894

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)

Nicholas Allard

Mailing Address 555 11th St. NW
Suite 1000

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Patton Boggs LLP

Occupation
Attorney

Receipt For: 2008

☒ 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 7

Transaction ID: C33021

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 6 / 183

(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. Michael T. Anders

Mailing Address 142 Downey St.

City	State	Zip Code
San Francisco	CA	94117

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fidelity Charitable Servi-
cesOccupation
Regional Manager

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32855

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. Joseph G. Armstrong

Mailing Address 11 West 81st St.

City	State	Zip Code
New York	NY	10024

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	4		2	0	0	7

Transaction ID: C32926

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. Clarence Avant

Mailing Address 1140 Maytor Pl.

City	State	Zip Code
Beverly Hills	CA	90210

FEC ID number of contributing
federal political committee.

C

Name of Employer
PolyGramOccupation
Chairman

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32938

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)

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 7 / 183

(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. Frederick J. Bailey

Mailing Address c/o Bank of New York
1633 Broadway 48th Fl.

City State Zip Code
New York NY 10019

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bank of New York

Occupation

Sales Manager

Receipt For: 2008

☒ 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 7

Transaction ID: C32850

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. Anne Bakar

Mailing Address 480 Wildwood Ave.

City State Zip Code
Piedmont CA 94611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Telcare Corp.

Occupation

President & CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32853

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. Daphne Barak

Mailing Address 525 E 72nd St
Apt 21B

City State Zip Code
New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Journalist

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32987

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
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FOR LINE NUMBER: PAGE 8 / 183

(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. Patrick H. BarryMailing Address 6 Peter Cooper Rd.
Apt. 10BCity State Zip Code
New York NY 10010FEC ID number of contributing
federal political committee.**C**Name of Employer
Barry & SonsOccupation
Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32985

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. Rafael H. Bernardino, Jr.

Mailing Address 15002 Hartsock St.

City State Zip Code
Sherman Oaks CA 91403FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C24779

Amount of Each Receipt this Period

1700.00

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

Full Name (Last, First, Middle Initial)

C. Rafael H. Bernardino, Jr.

Mailing Address 15002 Hartsock St.

City State Zip Code
Sherman Oaks CA 91403FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C24778

Amount of Each Receipt this Period

2300.00

☐ 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
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FOR LINE NUMBER: PAGE 9 / 183

(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) Howard Bovers		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 405 Lexington Ave 26th Fl.		Transaction ID: C32849
City State Zip Code New York NY 10174-2699	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Atlantic Sea Island Group LLC	Occupation Chairman	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Katharine R. Boyce		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 106 West Rosemont Ave.		Transaction ID: C32914
City State Zip Code Alexandria VA 22301	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Patton Boggs LLP	Occupation Attorney	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Nicholas A. Bratsafolis		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 7
Mailing Address 440 West End Ave. Apt. 4B		Transaction ID: C32940
City State Zip Code New York NY 10024	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Refinance.com	Occupation CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

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 10 / 183

(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) Nicholas A. Bratsafolis		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7	
Mailing Address 440 West End Ave. Apt. 4B		Transaction ID: C32990	
City New York	State NY	Amount of Each Receipt this Period 1000.00	
Zip Code 10024			
FEC ID number of contributing federal political committee. C			
Name of Employer Refinance.com		Occupation CEO	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00	
B. Full Name (Last, First, Middle Initial) Adam EB Brecht		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 7	
Mailing Address 7 Cornelia St. #2-F		Transaction ID: C32944	
City New York	State NY	Amount of Each Receipt this Period 250.00	
Zip Code 10014			
FEC ID number of contributing federal political committee. C			
Name of Employer International Cosmetics & Perfumes		Occupation Director of Corp. Communications	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1250.00	
C. Full Name (Last, First, Middle Initial) Adam EB Brecht		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 4 / 2 0 0 7	
Mailing Address 7 Cornelia St. #2-F		Transaction ID: C33032	
City New York	State NY	Amount of Each Receipt this Period 1000.00	
Zip Code 10014			
FEC ID number of contributing federal political committee. C			
Name of Employer International Cosmetics & Perfumes		Occupation Director of Corp. Communications	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1250.00	

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 11 / 183

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial) James L. Brooks Mailing Address c/o Freedman, Broder & Company 2501 Colorado Ave. Suite 350 City State Zip Code Santa Monica CA 90404 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 Transaction ID: C32851 Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation Gracie Films Director/Writer Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2300.00		
B. Full Name (Last, First, Middle Initial) Bo K. Brownstein Mailing Address 4550 Cherry Creek Dr. #2013 City State Zip Code Denver CO 80246 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Transaction ID: C32878 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)
Name of Employer Occupation Brownstein Hyatt Farber Schreck PC Attorney Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		
C. Full Name (Last, First, Middle Initial) Norman Brownstein Mailing Address 410-17th St. 22nd Fl. City State Zip Code Denver CO 80202 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7 Transaction ID: C32881 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)
Name of Employer Occupation Brownstein Hyatt Farber Schreck PC Attorney Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		

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 12 / 183

(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. Terry Butler

Mailing Address 305 South Galena St.

City State Zip Code
 Aspen CO 81611

FEC ID number of contributing
federal political committee.

C

Name of Employer
Residence Apartments

Occupation
Owner

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32989

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. Chickasaw Nation Enterprises

Mailing Address 1500 North Country Club Rd.

City State Zip Code
 Ada OK 74820-1862

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2300.00

Date of Receipt

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

Transaction ID: C32895

Amount of Each Receipt this Period

2300.00

☐ 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. Confederated Salish & Kootenai Tribes

Mailing Address P.O. Box 278
Hwy 93

City State Zip Code
 Pablo MT 59855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

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

Transaction ID: C32909

Amount of Each Receipt this Period

250.00

☐ 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)

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

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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) Howard D. Conkling		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 247 Grove Ave.		Transaction ID: C32834
City Verona	State NJ	Zip Code 07044
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 250.00
Name of Employer Port Authority of NY & NJ	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Cow Creek Band of Umpqua		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address Tribe of Indians 2371 NE Stephens St. Suite 100		Transaction ID: C32836
City Roseburg	State OR	Zip Code 97470
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 2300.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

C. Full Name (Last, First, Middle Initial) Cow Creek Band of Umpqua		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address Tribe of Indians 2371 NE Stephens St. Suite 100		Transaction ID: C32837
City Roseburg	State OR	Zip Code 97470
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C		Amount of Each Receipt this Period 2300.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional)

4850.00

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.

A. Full Name (Last, First, Middle Initial) Kevin A. Cudney Mailing Address 8272 Greenwood Pl. City Niwot State CO Zip Code 80503 FEC ID number of contributing federal political committee. C Name of Employer Brownstein Hyatt Farber Schreck, P Occupation Attorney Receipt For: 2008 <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 / 0 6 / 2 0 0 7 Transaction ID: C32937 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. Full Name (Last, First, Middle Initial) Steven C. Demby Mailing Address 2301 E. Alameda Ave. City Denver State CO Zip Code 80209 FEC ID number of contributing federal political committee. C Name of Employer Brownstein Hyatt Farber Schreck PC Occupation Attorney Receipt For: 2008 <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 / 0 1 / 2 0 0 7 Transaction ID: C32935 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)
C. Full Name (Last, First, Middle Initial) Alina DiDonato Mailing Address 400 Chambers St. #14G City New York State NY Zip Code 10282 FEC ID number of contributing federal political committee. C Name of Employer Marwood Group Occupation Healthcare Consultant Receipt For: 2008 <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 2 / 2 0 0 7 Transaction ID: C33011 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)

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

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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) Ellen M. DiFrancisco		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 45 Woodbrook Dr.		Transaction ID: C32951
City Ridge	State NY	Zip Code 11961
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Marwood Group	Occupation Vice President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	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. Full Name (Last, First, Middle Initial) Robert D. Dockendorff		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address 260 Amber Drive		Transaction ID: C32838
City San Francisco	State CA	Zip Code 94131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) Gary J. Dragul		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 8301 East Prentice Ave. Suite 210		Transaction ID: C32884
City Greenwood Village	State CO	Zip Code 80111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer GDA Real Estate Services LLC	Occupation President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3300.00

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.

A. Full Name (Last, First, Middle Initial) Gary J. Dragul		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 8301 East Prentice Ave. Suite 210		Transaction ID: C32885
City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GDA Real Estate Services LLC	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

B. Full Name (Last, First, Middle Initial) Shelly R. Dragul		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 8301 East Prentice Ave. Suite 210		Transaction ID: C32887
City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GDA Real Estate Services LLC	Occupation Realtor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

C. Full Name (Last, First, Middle Initial) Shelly R. Dragul		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 8301 East Prentice Ave. Suite 210		Transaction ID: C32886
City State Zip Code Greenwood Village CO 80111	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GDA Real Estate Services LLC	Occupation Realtor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4600.00	

SUBTOTAL of Receipts This Page (optional)

6900.00

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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☒ 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)

Eastern Band of Cherokee Indians

Mailing Address P.O. Box 455

City State Zip Code
 Cherokee NC 28719

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: C32903

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)

Elk Valley Rancheria

Mailing Address 2332 Howland Hill Rd.

City State Zip Code
 Crescent City CA 95531

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 0 5 / 2 0 0 7

Transaction ID: C33004

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

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

Steven Farber

Mailing Address 410-17th St.
Suite 2200

City State Zip Code
 Denver CO 80202

FEC ID number of contributing federal political committee.

C

Name of Employer
Brownstein, Hyatt, Farber
and StriOccupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32871

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)

3000.00

TOTAL This Period (last page this line number only)

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

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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)

Daniel J. Feiner

Mailing Address 1999 Avenue of the Stars
38th Fl.

City State Zip Code
Los Angeles CA 90067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Realty Funding Group LLC

Occupation
Vice President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: C32874

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)

Saul Feldman

Mailing Address 765 Market St. #23G

City State Zip Code
San Francisco CA 94103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Physician

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C32854

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)

Manuel Fernandez

Mailing Address PO Box 642

City State Zip Code
Sacramento CA 95814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Riveraty Investments

Occupation
Real Estate Investor

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: C32866

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)

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
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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. Alexander D. Forger

Mailing Address 20 Sutton Place South
Apt. 15C

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Oak Spring Farms LLC

Occupation
Attorney

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32959

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. Heather Fox

Mailing Address 12411 Ventura Blvd.

City State Zip Code
Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C32883

Amount of Each Receipt this Period

2300.00

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

Full Name (Last, First, Middle Initial)

C. Ingrid Fox

Mailing Address 12411 Ventura Blvd.

City State Zip Code
Studio City CA 91604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C32882

Amount of Each Receipt this Period

2300.00

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

SUBTOTAL of Receipts This Page (optional)

5600.00

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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☒ 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)
Jonathan Fox
Mailing Address 49 Lake Dr. South

City State Zip Code
West Islip NY 11795

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
VP of Healthcare

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32954

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)
Brian D. Frenkel
Mailing Address 6425 Greenbriar Dr.

City State Zip Code
Englewood CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Metro Home Furniture LLC

Occupation
Owner

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32870

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)
Cynthia Friedman
Mailing Address 300 Seminole Ave.
Apt 2A

City State Zip Code
Palm Beach FL 33480-3779

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Philanthropist

Receipt For: 2008
☒ 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 3 / 2 0 0 7

Transaction ID: C33026

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

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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)

Gila River Indian Community

Mailing Address P.O. Box 2160

City State Zip Code
 Sacaton AZ 85247

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32901

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)

Roger M. Gilbert

Mailing Address 1524 40th St.

City State Zip Code
 Sacramento CA 95819

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Associates

Occupation
Physician

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32862

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)

Samir Goow

Mailing Address 437 Edmund Ave.

City State Zip Code
 Paterson NJ 07502

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investigations Unlimited

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32832

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 22 / 183

(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. Graham

Mailing Address 6 Stratford Dr.

City State Zip Code
 Livingston NJ 07039

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairview Insurance Agency

Occupation
CEO

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C32830

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)

Steven Green

Mailing Address 4350 S. Monoco St. #500

City State Zip Code
 Denver CO 80237

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARI Investment Group

Occupation
Managing Director

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32890

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)

Craig Hall

Mailing Address 6801 Gaylord Parkway
Suite 100

City State Zip Code
 Frisco TX 75034

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hall Financial Group Inc.

Occupation
CEO & President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32858

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)

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

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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) Kathryn Hall		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 0 / 2 0 0 7
Mailing Address 6801 Gaylord Parkway Suite 100		Transaction ID: C32857
City Frisco	State TX	Zip Code 75034
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hall Vineyards	Occupation Owner	
Receipt For: 2008 <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. Full Name (Last, First, Middle Initial) William Harla		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 305 Prospect Ave.		Transaction ID: C32831
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Decotis, Fitzpatrick, Co- le & Wisl	Occupation Partner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1022.70	

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

C. Full Name (Last, First, Middle Initial) Martin A. Harmon		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 9 / 2 0 0 7
Mailing Address 4020 Sierra College Blvd. Suite 200		Transaction ID: C32868
City Rocklin	State CA	Zip Code 95677
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer General Engineering & Bui- lding	Occupation President	
Receipt For: 2008 <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

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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) Norman Hsu		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 160 Wooster St. #3C		Transaction ID: C33017
City New York	State NY	Zip Code 10012
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Components Ltd.	Occupation Director	
Receipt For: 2008 <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. Full Name (Last, First, Middle Initial) Steven M. Hyjek		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 8615 Hampton Way		Transaction ID: C33001
City Fairfax Station	State VA	Zip Code 22039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Hyjek & Fix, Inc.	Occupation Partner	
Receipt For: 2008 <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)

C. Full Name (Last, First, Middle Initial) Samuel G. Jarkey		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 44 Brookwood Dr.		Transaction ID: C32826
City Wayne	State NJ	Zip Code 07470
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Retired	
Receipt For: 2008 <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)

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

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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)
Benjamin A. Kahn
Mailing Address 2590 Cherry St.

City State Zip Code
Denver CO 80207

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brownstein Hyatt Farber
Schreck PC

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32889

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)
Mitchell Kahn
Mailing Address 125 Jericho Turnpike

City State Zip Code
Jericho NY 11753

FEC ID number of contributing
federal political committee.

C

Name of Employer
KGS LLP

Occupation
CPA

Receipt For: 2008
☒ 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 7

Transaction ID: C33009

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)
Michael J. Keating
Mailing Address 424 East 1st Ave. #1B

City State Zip Code
Denver CO 80203

FEC ID number of contributing
federal political committee.

C

Name of Employer
Merrill Financial Printing

Occupation
Vice President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32891

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)

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 26 / 183

(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)
Howard J. 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
Kessler Financial Services

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C33044

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)
Morteza Khaleghi
Mailing Address 1343 Amalfi Dr.

City State Zip Code
Pacific Palisades CA 90272

FEC ID number of contributing
federal political committee.

C

Name of Employer
Creative Care Inc.

Occupation
Psychologist

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

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

Transaction ID: C32939

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)
Andrew R. Klein
Mailing Address 5275 DTC Parkway

City State Zip Code
Greenwood Village CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
ICON Investment Group

Occupation
Principal

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: C32869

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)

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 27 / 183

(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)

Christina Kockinis

Mailing Address PO Box 19582

City State Zip Code
 Sacramento CA 95819

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Fundraiser

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32863

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)

Sotiris K. Kolokotron

Mailing Address 560 Rodante Way

City State Zip Code
 Sacramento CA 95864

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Developer

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32917

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)

Gregory J. Kolomitz

Mailing Address 901 Detroit St.

City State Zip Code
 Denver CO 80206

FEC ID number of contributing
federal political committee.

C

Name of Employer
Solutions West Inc.

Occupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32888

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 28 / 183

(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) Orin S. Kramer		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 7
Mailing Address 261 Glenwood Rd.		Transaction ID: C32931
City Englewood	State NJ	Zip Code 07631
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Boston Provident LP	Occupation General Partner	
Receipt For: 2008 <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. Full Name (Last, First, Middle Initial) Leon Kraus		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 108 8th St.		Transaction ID: C33013
City Brooklyn	State NY	Zip Code 11215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Executive	
Receipt For: 2008 <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)

C. Full Name (Last, First, Middle Initial) Ana Lazo Tenzer		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 2 / 2 0 0 7
Mailing Address 4081 Saint Petersburg St.		Transaction ID: C32875
City Boulder	State CO	Zip Code 80301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Brownstein Hyatt Farber Schreck PC	Occupation Attorney	
Receipt For: 2008 <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)

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 29 / 183

(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 J. Ledva

Mailing Address 207-211 East 89th St.
Apt. 14A

City State Zip Code
New York NY 10128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Vice President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32947

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)

Danny Lee

Mailing Address 30 Markwood Rd.

City State Zip Code
Forest Hls NY 11375

FEC ID number of contributing
federal political committee.

C

Name of Employer
New Spring Inc.

Occupation
Project Manager

Receipt For: 2008
☒ 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 7 / 2 0 0 7

Transaction ID: C33022

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)

Joel S. Lever

Mailing Address 2 Broadmoor Rd.

City State Zip Code
Scarsdale NY 10583

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kurzman, Eisenberg, Corbin
& Lever

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32949

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
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☒ 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) Hans Li		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 230 Central Park South Apt. 7D		Transaction ID: C32929
City State Zip Code New York NY 10019	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-employed	Occupation Architect	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Gail K. Lieberfarb		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address c/o Sherry Darling Management 323 W. Grand Ave.		Transaction ID: C32842
City State Zip Code El Segundo CA 90245	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer National Mental Health Awareness	Occupation Chair	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Terry L. Lierman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 7 / 2 0 0 7
Mailing Address 7200 Delfield St		Transaction ID: C32945
City State Zip Code Chevy Chase MD 20815-4046	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Health Ventures	Occupation Partner	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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
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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. Joanne Lucianin

Mailing Address 15 Pearl St.

City State Zip Code
 Passaic NJ 07055

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: C32833

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. James Lustig

Mailing Address 52 Sedgwick Dr.

City State Zip Code
 Englewood CO 80110

FEC ID number of contributing
federal political committee.

C

Name of Employer
HC Company

Occupation

Investor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32879

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. Slavco Madzarov

Mailing Address 5 Ferris Dr.

City State Zip Code
 Clifton NJ 07011

FEC ID number of contributing
federal political committee.

C

Name of Employer
Slavco Construction

Occupation

President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32823

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)

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

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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. Anthony Marandola

Mailing Address 24 Minnesota Ave.

City State Zip Code
 Warwick RI 02888

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marandola Plumbing & Heat-
ing Co.

Occupation
Mechanical Contractor

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C24785

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. Albert Mardirossian, Jr.

Mailing Address 140 Hepburn Rd

City State Zip Code
 Clifton NJ 07012-2231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Builder/Developer

Receipt For: 2008
☒ 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 2 / 2 0 0 7

Transaction ID: C32829

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. 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: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C32907

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

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

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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. J. Patrick McGilvray

Mailing Address 1115 Alhambra Blvd.

City State Zip Code
 Sacramento CA 95816

FEC ID number of contributing
federal political committee.

C

Name of Employer
Home Buying Center

Occupation
Real Estate Investor

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

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

Transaction ID: C32865

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. Garry K. McGuire, Jr.

Mailing Address 1170 Sacramento St.
 #9A

City State Zip Code
 San Francisco CA 94108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gyro International

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

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

Transaction ID: C32859

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. Mille Lacs Band of Ojibwe

Mailing Address 43408 Oodena Dr.

City State Zip Code
 Onamia MN 56359

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

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

Transaction ID: C32902

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)

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

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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)

John T. Moore

Mailing Address 9 Old Field Rd.

City State Zip Code
 Setauket NY 11733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Investor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32956

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)

Terence S. Moore

Mailing Address 157 East 71st St.
Apt. 3F

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Vice President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32955

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)

Daniel M. Neidich

Mailing Address 120 E. End Ave.

City State Zip Code
 New York NY 10028

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dune Capital Management

Occupation
Partner

Receipt For: 2008

☒ 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 7

Transaction ID: C33045

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)

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
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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) Nisqually Indian Tribe Mailing Address 4820 She-Nah-Num Dr. SE City Olympia State WA Zip Code 98513 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 05 / 2007 Transaction ID: C33005 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) Funds Permissible Under the Act
B. Full Name (Last, First, Middle Initial) North Fork Rancheria Mailing Address PO Box 929 City North Fork State CA Zip Code 93643 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 28 / 2007 Transaction ID: C32896 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) Funds Permissible Under the Act
C. Full Name (Last, First, Middle Initial) Douglas R. Nunes Mailing Address 340 West 57th St. Apt. 14B City New York State NY Zip Code 10019 FEC ID number of contributing federal political committee. C Name of Employer Occupation Krauter & Company Senior Vice President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 15 / 2007 Transaction ID: C32988 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)

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

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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) Ronald Oehl		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 485 Madison Ave.		Transaction ID: C32991
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Stonehenge Capital Corpor- ation	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Susan Patricof		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 830 Park Ave.		Transaction ID: C32958
City New York	State NY	Zip Code 10021-2757
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Philanthropist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Pechanga Band of Luiseno Mission Indians		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address P.O. Box 1477		Transaction ID: C32904
City Temecula	State CA	Zip Code 92593
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

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)
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☒ 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 J. Perr
Mailing Address 12 Somerton Sq.

City State Zip Code
Medford NJ 08055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fineman Krekstein & Harris

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C33006

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)
Lisa Pion-Berlin
Mailing Address 630 Purdue Dr.

City State Zip Code
Claremont CA 91711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Parents Anonymous

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32999

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)
Andrew Poggi
Mailing Address 19 Angela Circle

City State Zip Code
Hazlet NJ 07730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Meddusa Healthcare Systems
Inc.

Occupation
Chairman & CEO

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32821

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)

750.00

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)

Carmen A. Policy

Mailing Address 1100 Sacramento St. #908

City State Zip Code
 San Francisco CA 94108

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

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

Transaction ID: C32852

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)

Puyallup Tribe of Indians

Mailing Address 3009 East Portland Ave.

City State Zip Code
 Tacoma WA 98404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3300.00

Date of Receipt

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

Transaction ID: C33049

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)

Puyallup Tribe of Indians

Mailing Address 3009 East Portland Ave.

City State Zip Code
 Tacoma WA 98404

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 3300.00

Date of Receipt

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

Transaction ID: C32905

Amount of Each Receipt this Period

1300.00

☐ 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)

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

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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)

Brian A. Rathjen

Mailing Address 15 Beverly Rd.

City State Zip Code
 Rockville Center NY 11570

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Client Services

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32957

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)

Denis T. Rice

Mailing Address 3 Embarcadero Ctr. 7th Fl.

City State Zip Code
 San Francisco CA 94111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Howard Rice et al

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

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

Transaction ID: C32856

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)

Blair E. Richardson

Mailing Address 1490 Lafayette St.
Suite 400

City State Zip Code
 Denver CO 80218

FEC ID number of contributing
federal political committee.

C

Name of Employer
Bow River Capital Partners

Occupation
Managing Partner

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

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

Transaction ID: C32893

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)

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

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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 Richter

Mailing Address 3136 Q St. NW

City State Zip Code
 Washington DC 20037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Patton Boggs LLP

Occupation
Attorney

Receipt For: 2008

☒ 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 7

Transaction ID: C33010

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. Mitchell Rosenthal

Mailing Address 164 W 74th St

City State Zip Code
 New York NY 10023-2301

FEC ID number of contributing
federal political committee.

C

Name of Employer
Phoenix House

Occupation
Executive

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 0 5 / 2 0 0 7

Transaction ID: C32927

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. Jean Runyon

Mailing Address 6690 13th St.

City State Zip Code
 Sacramento CA 95831

FEC ID number of contributing
federal political committee.

C

Name of Employer
Runyon, Saltzman Eihorn

Occupation
Principal

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32867

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
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☒ 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)

Gillian Sackler

Mailing Address 660 Park Ave.

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Arthur M. Sackler Founda-
tion

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32962

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)

Saginaw Chippewa Indian Tribe

Mailing Address 7070 E. Broadway

City State Zip Code
 Mount Pleasant MI 48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

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

Transaction ID: C33028

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

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: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2300.00

Date of Receipt

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

Transaction ID: C33030

Amount of Each Receipt this Period

2300.00

☐ 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)

5300.00

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 / 183

(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)

Mario A. Savvides

Mailing Address 53 Skytop Dr.

City State Zip Code
 Mahwah NJ 07430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mastercard Worldwide

Occupation
Management

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32825

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)

Philip A. Schaefer

Mailing Address 12 Penninsula Rd.

City State Zip Code
 Belvedere CA 94920

FEC ID number of contributing
federal political committee.

C

Name of Employer
World Pension Forum

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32916

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)

Yitzchok Schwartz

Mailing Address 191 Rodney St.

City State Zip Code
 Brooklyn NY 11211

FEC ID number of contributing
federal political committee.

C

Name of Employer
B & H Staffing

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32946

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 43 / 183

(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 A. Schwarzman

Mailing Address 345 Park Ave. 31st Fl.

City State Zip Code
 New York NY 10154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Blackstone Group

Occupation
Investment Banker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32961

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)

Peter K. Shah

Mailing Address 123 Greenbriar Way

City State Zip Code
 Salinas CA 93907

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stevens, Sloan & Shah

Occupation
CPA

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1027.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 9 / 2 0 0 7

Transaction ID: C33012

Amount of Each Receipt this Period

1027.00

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

* In-Kind: Travel

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

Kathleen M. Sloane

Mailing Address 715 Park Ave.
Apt. 15A

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Brown Harris & Stevens

Occupation
Vice President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32992

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)

2527.00

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 / 183

(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. Todd J. Slotkin

Mailing Address 888 Park Ave. Apt. 12B

City State Zip Code
 New York NY 10021

FEC ID number of contributing
federal political committee.

C

Name of Employer
IXIS Capitol Markets

Occupation
Executive

Receipt For: 2008

☒ 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 4 / 2 0 0 7

Transaction ID: C32925

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. Jean K. Smith

Mailing Address 4 Sutton Pl. Apt. 6

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C33015

Amount of Each Receipt this Period

2300.00

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

Full Name (Last, First, Middle Initial)

C. Jean K. Smith

Mailing Address 4 Sutton Pl. Apt. 6

City State Zip Code
 New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Retired

Receipt For: 2008

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C33016

Amount of Each Receipt this Period

2300.00

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

SUBTOTAL of Receipts This Page (optional)

5600.00

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.

A. Full Name (Last, First, Middle Initial) Kym Smith Morgan		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address c/o Park Agency Inc. 330 Madison Ave. Suite 280		Transaction ID: C32993
City New York State NY Zip Code 10017	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Maui Photography	Occupation Art Rep	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B. Full Name (Last, First, Middle Initial) Jay T. Snyder		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 7
Mailing Address 1020 5th Ave.		Transaction ID: C33008
City New York State NY Zip Code 10028	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer HBJ Investments	Occupation Financier	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

C. Full Name (Last, First, Middle Initial) Soboba Band of Luiseno Indians		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address P.O. Box 487		Transaction ID: C32897
City San Jacinto State CA Zip Code 92581	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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 46 / 183

(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)
Dennis Someck

Mailing Address 9 Tiffany Circle

City State Zip Code
 North Hills NY 11030

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Commerical Real Estate Broker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32948

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)
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: 2008

☒ 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 8 / 2 0 0 7

Transaction ID: C32898

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)
Jean Stein

Mailing Address 10 Gracie Square
Penthouse N

City State Zip Code
 New York NY 10028

FEC ID number of contributing federal political committee.

C

Name of Employer
Self-employed

Occupation

Journalist/Author

Receipt For: 2008

☒ 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 1 / 2 0 0 7

Transaction ID: C32924

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

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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. Michael Steinberg

Mailing Address 188 Minna St. #22E

City State Zip Code
 San Francisco CA 94105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 2 4 / 2 0 0 7

Transaction ID: C32843

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. Rose Styron

Mailing Address 12 Rucum Rd.

City State Zip Code
 Roxbury CT 06783

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation

Poet

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C33014

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. Paul S. Su

Mailing Address 293 Candlewood Path

City State Zip Code
 Dix Hills NY 11746-8003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Dilini Management Group
LLC

Occupation

President

Receipt For: 2008

☒ 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 7

Transaction ID: C33020

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 48 / 183

(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)

Barbara Sutton

Mailing Address 4 Franklin St.

City State Zip Code
 Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer
Cassidy & Associates

Occupation
Govt. Relations Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 5 / 2 0 0 7

Transaction ID: C32915

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)

Edward J. Tedesco

Mailing Address Souther Rd.

City State Zip Code
 Gloucester MA 01930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mount Vernon Group

Occupation
Architect

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C24777

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)

Maurice Tempelman

Mailing Address 529 5th Ave. #16

City State Zip Code
 New York NY 10017

FEC ID number of contributing
federal political committee.

C

Name of Employer
Leon Tempelman & Sons

Occupation
General Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32960

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 49 / 183

(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. Tabitha Totten

Mailing Address 550 Anderson Ave. # 2

City State Zip Code
 Cliffside Park NJ 07010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32824

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. Alexandra Tsakopoulos

Mailing Address 7700 College Town Dr.
Suite 101

City State Zip Code
 Sacramento CA 95826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32912

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. Angelo Tsakopoulos

Mailing Address 7700 College Town Dr
Ste 101

City State Zip Code
 Sacramento CA 95826-2303

FEC ID number of contributing
federal political committee.

C

Name of Employer
AKT Development

Occupation

Chairman

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32860

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 50 / 183

(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. Athena Tsakopoulos

Mailing Address 7700 College Town Dr.
Suite 101

City State Zip Code
Sacramento CA 95826

FEC ID number of contributing
federal political committee.

C

Name of Employer
AKT Development

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32910

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. Chrysanthi Tsakopoulos

Mailing Address 7700 College Town Dr.
Suite 101

City State Zip Code
Sacramento CA 95826

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Student

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32913

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. Katina Tsakopoulos

Mailing Address 7700 College Town Dr.
Suite 101

City State Zip Code
Sacramento CA 95826

FEC ID number of contributing
federal political committee.

C

Name of Employer
AKT Development

Occupation
Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32911

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 51 / 183

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sofia Tsakopoulos

Mailing Address 5309 Retreat Way

City	State	Zip Code
Carmichael	CA	95608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
Homemaker

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32864

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. Eleni F. Tsakopoulos-KounalakisMailing Address 2090 Pacific Ave
Apt 501

City	State	Zip Code
San Francisco	CA	94109-2250

FEC ID number of contributing
federal political committee.

C

Name of Employer
AKT DevelopmentOccupation
President

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

320.00

Date of Receipt

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

Transaction ID: C32923

Amount of Each Receipt this Period

320.00

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)
* In-Kind: Reception - Pr-
oduction Services

Full Name (Last, First, Middle Initial)

C. Viejas Tribal Government

Mailing Address 1 Viejas Grade Rd.

City	State	Zip Code
Alpine	CA	91901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

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

Transaction ID: C32908

Amount of Each Receipt this Period

2300.00

☐ 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)

3620.00

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 / 183

(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 Vinnik

Mailing Address 5925 E. Princeton Cir.

City State Zip Code
 Englewood CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-employed

Occupation
Investor

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32880

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. Louis A. Vismara

Mailing Address 3941 J. St.
#260

City State Zip Code
 Sacramento CA 95814

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senator Don Perata

Occupation
Policy Consultant

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32861

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. Craig M. Wallace

Mailing Address 493 Beechwood St.

City State Zip Code
 Cohasset MA 02025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Sales

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32950

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)

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 53 / 183

(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)
Michael R. Wasserman
Mailing Address 175 Nantucket Pl.

City State Zip Code
Morganville NJ 07751

FEC ID number of contributing
federal political committee.

C

Name of Employer
Marwood Group

Occupation
Attorney

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32953

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)
Weiner & Katz LLC
Mailing Address 301 South Livingston Ave.
Suite 101

City State Zip Code
Livingston NJ 07039

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: C32828

Amount of Each Receipt this Period

250.00

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

Refund issued this period

C. Full Name (Last, First, Middle Initial)
Howard Weingrow
Mailing Address 805 Third Ave., 15th Floor

City State Zip Code
New York NY 10022

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stanoff Corporation

Occupation
President

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 7

Transaction ID: C32928

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 54 / 183

(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. AndersonTuell, LLP

Mailing Address 300 Independence Ave. SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32899

Amount of Each Receipt this Period

1000.00

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

PARTNERSHIP--partners below if itemized

Full Name (Last, First, Middle Initial)

B. Michael J. Anderson

Mailing Address AndersonTuell LLP
 300 Independence Ave. SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AndersonTuell LLP

Occupation
 Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32922

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]

Full Name (Last, First, Middle Initial)

C. Loretta A. Tuell

Mailing Address AndersonTuell LLP
 300 Independence Ave. SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
 AndersonTuell LLP

Occupation
 Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32921

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)

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.

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

Decotiis, Fitzpatrick, Cole & Wisler LLP

Mailing Address 500 Frank W. Burr Blvd.

City State Zip Code
 Teaneck NJ 07666

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32963

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

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

William Harla

Mailing Address 305 Prospect Ave.

City State Zip Code
 Princeton NJ 08540

FEC ID number of contributing
federal political committee.

C

Name of Employer
Decotiis, Fitzpatrick, Cole & Wisler LLP

Occupation
Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1022.70

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32971

Amount of Each Receipt this Period

22.70

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

[MEMO ITEM]

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

Lerch, Vinci & Higgins

Mailing Address 17-17 Rt. 208

City State Zip Code
 Fair Lawn NJ 07410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: C32827

Amount of Each Receipt this Period

250.00

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

PARTNERSHIP--partners below if itemized

SUBTOTAL of Receipts This Page (optional)

750.00

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 / 183

(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) Dieter Lerch		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address c/o Lerch, Vinci & Higgins 17-17 Route 208		Transaction ID: C32841
City Fair Lawn	State NJ	Amount of Each Receipt this Period 250.00
Zip Code 07410		
FEC ID number of contributing federal political committee. C		
Name of Employer Lerch, Vinci & Higgins	Occupation Partner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Millennium Strategie LLC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 60 Roseland Ave.		Transaction ID: C32986
City Caldwell	State NJ	Amount of Each Receipt this Period 500.00
Zip Code 07006		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) LLC permissible funds see below if itemized

C. Full Name (Last, First, Middle Initial) Edward Farmer		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 7
Mailing Address 14 Sunburst Ln.		Transaction ID: C33019
City Piscataway	State NJ	Amount of Each Receipt this Period 500.00
Zip Code 08854		
FEC ID number of contributing federal political committee. C		
Name of Employer Millennium Strategies LLC	Occupation Member	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

500.00

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 / 183

(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'Dwyer & Bernstein LLP

Mailing Address 52 Duane St.

City State Zip Code
 New York NY 10007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32930

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

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

Brian O'Dwyer

Mailing Address c/o O'Dwyer & Bernstein LLP
 52 Duane St. 5th Fl.

City State Zip Code
 New York NY 10007

FEC ID number of contributing
federal political committee.

C

Name of Employer
 O'Dwyer & Bernstein LLP

Occupation
 Partner

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C33048

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]

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

S.S.C. LLC

Mailing Address 155 Polifly Rd.
 Suite 103

City State Zip Code
 Hackensack NJ 07601

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: C33040

Amount of Each Receipt this Period

250.00

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

* In-Kind: Printing Printing

SUBTOTAL of Receipts This Page (optional)

750.00

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 / 183

(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) Raymond Ferraioli, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address c/o S.S.C. LLC 155 Polifly Rd. Suite 103		Transaction ID: C33047
City Hackensack	State NJ	Amount of Each Receipt this Period 250.00
Zip Code 07601		
FEC ID number of contributing federal political committee. C		
Name of Employer S.S.C. LLC	Occupation Partner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) S.S.C. LLC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 155 Polifly Rd. Suite 103		Transaction ID: C33041
City Hackensack	State NJ	Amount of Each Receipt this Period 150.00
Zip Code 07601		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * In-Kind: Postage Postage

C. Full Name (Last, First, Middle Initial) Raymond Ferraioli, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address c/o S.S.C. LLC 155 Polifly Rd. Suite 103		Transaction ID: C33046
City Hackensack	State NJ	Amount of Each Receipt this Period 150.00
Zip Code 07601		
FEC ID number of contributing federal political committee. C		
Name of Employer S.S.C. LLC	Occupation Partner	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

139347.00

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

FOR LINE NUMBER: PAGE 59 / 183

(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City	State	Zip Code
Washington	DC	20003

FEC ID number of contributing
federal political committee.**C** C00000935

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	7

Transaction ID: C33023

Amount of Each Receipt this Period

7.51

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

* In-Kind: Postage

SUBTOTAL of Receipts This Page (optional)

7.51

TOTAL This Period (last page this line number only)

7.51

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

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

FOR LINE NUMBER: PAGE 60 / 183

(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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C32996

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. Altria Group Inc. PAC

Mailing Address 101 Constitution Ave. NW

City State Zip Code
 Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00089136

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C24787

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. American Dental PAC

Mailing Address 1111 - 14th Street, NW
 Suite 1100

City State Zip Code
 Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00000729

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C24788

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

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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. American Hospital Association PAC

Mailing Address 325 7th St. NW

City State Zip Code
 Washington DC 20004

FEC ID number of contributing
federal political committee.

C C00106146

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C33000

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. American Maritime Officers, Voluntary PAF

Mailing Address 650 Fourth Avenue

City State Zip Code
 Brooklyn NY 11232

FEC ID number of contributing
federal political committee.

C C00027532

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32919

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. American Nurses Association PAC

Mailing Address 600 Maryland Ave SW
Suite 100 West

City State Zip Code
 Washington DC 20024

FEC ID number of contributing
federal political committee.

C C00017525

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 0 2 / 1 4 / 2 0 0 7

Transaction ID: C32846

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 62 / 183

(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 Occupational Therapy Assoc., Inc. PAC

Mailing Address 4720 Montgomery Ln.

City State Zip Code
 Bethesda MD 20814

FEC ID number of contributing
federal political committee.

C C00089086

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32920

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. American Psychiatric Association PAC

Mailing Address 1000 Wilson Blvd. Suite 1825

City State Zip Code
 Arlington VA 22209

FEC ID number of contributing
federal political committee.

C C00373696

Name of Employer

Occupation

Receipt For: 2008

☒ 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 7

Transaction ID: C33029

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. Association of Trial Lawyers of America

Mailing Address 1050 31st Street, NW

City State Zip Code
 Washington DC 20007

FEC ID number of contributing
federal political committee.

C C00024521

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 3 / 1 5 / 2 0 0 7

Transaction ID: C33002

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)

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 63 / 183

(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. AT&T Federal PAC

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

City	State	Zip Code
San Antonio	TX	78205

FEC ID number of contributing
federal political committee.**C** C00109017

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C33024

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. BAE Systems USA PAC

Mailing Address 1215 Jefferson Davis Highway
Suite 1500

City	State	Zip Code
Arlington	VA	22202

FEC ID number of contributing
federal political committee.**C** C00281212

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32839

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. 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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C33042

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)
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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)
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: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32997

Amount of Each Receipt this Period

2500.00

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

B. 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: 2008
☒ 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 7

Transaction ID: C33043

Amount of Each Receipt this Period

1500.00

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

C. Full Name (Last, First, Middle Initial)
CWA-COPE PCC
Mailing Address 501 3rd St. NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

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

Transaction ID: C32845

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)

5500.00

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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☐ 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. Drinker Biddle PAC

Mailing Address 1500 K St. NW
Suite 1100

City State Zip Code
Washington DC 20005

FEC ID number of contributing
federal political committee.

C C00370759

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C32933

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. 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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C33007

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. 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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32995

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)
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

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

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: 2008

☒ 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 8 / 2 0 0 7

Transaction ID: C32900

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)

International Assoc. of Fire Fighters Interested in Registration & Education PAC

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: 2008

☒ 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 7

Transaction ID: C33027

Amount of Each Receipt this Period

2500.00

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

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

International Game Technology PAC

Mailing Address 9295 Prototype Dr.

City

State

Zip Code

Reno

NV

89521

FEC ID number of contributing
federal political committee.

C C00316331

Name of Employer

Occupation

Receipt For: 2008

☒ 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 8 / 2 0 0 7

Transaction ID: C32906

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)

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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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

A. Full Name (Last, First, Middle Initial)
International Longshoremen'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: 2008
☒ 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 1 / 2 0 0 7

Transaction ID: C32848

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)
Local 68 Engineers PAC

Mailing Address 11 Fairfield Pl.

City State Zip Code
West Caldwell NJ 07006

FEC ID number of contributing
federal political committee. **C** C00138966

Name of Employer Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: C32822

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)
National Air Traffic Controllers Association PAC

Mailing Address 1150 17th Street, NW Suite 701

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C33003

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 68 / 183

(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)

PMA PAC

Mailing Address 1755 Jefferson Davis Hwy.
Suite 1107

City State Zip Code
Arlington VA 22202

FEC ID number of contributing
federal political committee.

C C00280321

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: C32932

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)

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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: C32844

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)

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: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 1 5 / 2 0 0 7

Transaction ID: C32994

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

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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) SAIC VPAC Mailing Address 10260 Campus Point Drive City San Diego State CA Zip Code 92121 FEC ID number of contributing federal political committee. C C00300418 Name of Employer Occupation Receipt For: 2008 <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 7 Transaction ID: C33031 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. Full Name (Last, First, Middle Initial) Sheet Metal Workers' International Assoc. Mailing Address 1750 New York Ave. NW City Washington State DC Zip Code 20006 FEC ID number of contributing federal political committee. C C00007542 Name of Employer Occupation Receipt For: 2008 <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 Y 0 3 / 1 6 / 2 0 0 7 Transaction ID: C33018 Amount of Each Receipt this Period 2500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) Textron, Inc. PAC Mailing Address P. O. Box 878 40 Westminster St. City Providence State RI Zip Code 02901 FEC ID number of contributing federal political committee. C C00123612 Name of Employer Occupation Receipt For: 2008 <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 3 / 2 0 0 7 Transaction ID: C33025 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)**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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(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)

UAW V CAP

Mailing Address 8000 E. Jefferson

City

Detroit

State

MI

Zip Code

48214

FEC ID number of contributing
federal political committee.

C C00002840

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 0 7

Transaction ID: C32847

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)

1000.00

TOTAL This Period (last page this line number only)

37000.00

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

FOR LINE NUMBER: PAGE 71 / 183

(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)

Verizon

Mailing Address P.O. Box 28007

City

Lehigh Valley

State

PA

Zip Code

18002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2304.03

Date of Receipt

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

Transaction ID: C33033

Amount of Each Receipt this Period

31.13

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

Refund - Telephone

SUBTOTAL of Receipts This Page (optional)

31.13

TOTAL This Period (last page this line number only)

31.13

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

FOR LINE NUMBER: PAGE 72 / 183

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" 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) Citizens Bank Mailing Address 601 Washington St. City Stoughton State MA Zip Code 02072 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7536.31		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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C33034 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1482.02</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest	M	M	/	D	D	/	Y	Y	Y	Y	0	1		3	1		2	0	0	7	1482.02									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	1		3	1		2	0	0	7																							
1482.02																																
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. C Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7536.31		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>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C33035 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1225.17</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	8		2	0	0	7	1225.17									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	2		2	8		2	0	0	7																							
1225.17																																
C. 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. C Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7536.31		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>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C33036 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">1410.56</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	1		2	0	0	7	1410.56									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		3	1		2	0	0	7																							
1410.56																																

SUBTOTAL of Receipts This Page (optional)

4117.75

TOTAL This Period (last page this line number only)

4117.75

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)

PAGE 73 / 183

☒ 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 Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10169

Date of Disbursement

02 / 28 / 2007

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: D10431

Date of Disbursement

03 / 01 / 2007

Amount of Each Disbursement this Period

35.00

☐ 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: D10425

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

4.50

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

SUBTOTAL of Disbursements This Page (optional)

44.00

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. 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: D10044

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

16486.25

☐ 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: D10043

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

8910.25

☐ 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: D10080

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

3364.33

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

SUBTOTAL of Disbursements This Page (optional)

28760.83

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: D10200

Date of Disbursement

03 / 12 / 2007

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)

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: D10409

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

126.00

☐ 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: D10410

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

2810.72

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

SUBTOTAL of Disbursements This Page (optional)

3186.72

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

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 - Entertainment

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10078

Date of Disbursement

01 / 16 / 2007

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. Brian Barrie

Mailing Address 680 Serotina Ct.

City
Mount Pleasant

State
SC

Zip Code
29464

Purpose of Disbursement
Consultant-Website

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10125

Date of Disbursement

02 / 05 / 2007

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. Brian Barrie

Mailing Address 680 Serotina Ct.

City
Mount Pleasant

State
SC

Zip Code
29464

Purpose of Disbursement
Consultant-Website

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10197

Date of Disbursement

03 / 12 / 2007

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)

1500.00

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. Big Brothers of Rhode Island

Mailing Address 100 Lafayette St.

City
PawtucketState
RIZip Code
02860Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10137

Date of Disbursement

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

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. Rachael BornsteinMailing Address 18 9th St. NE
Apt. 404City
WashingtonState
DCZip Code
20002Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10154

Date of Disbursement

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

Amount of Each Disbursement this Period

75.00

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

Full Name (Last, First, Middle Initial)

C. Adam Brand

Mailing Address 704 Crooked Creek Dr.

City
RockvilleState
MDZip Code
20850Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10118

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	5	/	2	0	0	7

Amount of Each Disbursement this Period

324.71

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

SUBTOTAL of Disbursements This Page (optional)

899.71

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. Paul A. Buterbaugh

Mailing Address 11 Exeter Rd.

City
North KingstownState
RIZip Code
02852Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10067

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	7

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
Travel

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10100

Date of Disbursement

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

Amount of Each Disbursement this Period

32.00

☐ 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
02852Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10106

Date of Disbursement

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

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)

789.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of 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: D10147

Date of Disbursement

02 / 15 / 2007

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
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10167

Date of Disbursement

02 / 28 / 2007

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 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: D10192

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

66.00

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

SUBTOTAL of Disbursements This Page (optional)

823.94

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of 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: D10209

Date of Disbursement

03 / 15 / 2007

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
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10423

Date of Disbursement

03 / 31 / 2007

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. 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: D10073

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

270.00

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

SUBTOTAL of Disbursements This Page (optional)

1027.94

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

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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. 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: D10149

Date of Disbursement

02 / 19 / 2007

Amount of Each Disbursement this Period

270.00

☐ 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: D10193

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

540.00

☐ 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 - Auto

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10086

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

4419.00

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

SUBTOTAL of Disbursements This Page (optional)

5229.00

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. Chubb Insurance

Mailing Address P.O. Box 7247-0180

City
PhiladelphiaState
PAZip Code
19170Purpose of Disbursement
Insurance - Worker's Comp. & Liability

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10156

Date of Disbursement

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

Amount of Each Disbursement this Period

2547.00

☐ 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
ProvidenceState
RIZip Code
02906Purpose of Disbursement
Constituent expense

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10072

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

117.16

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

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City
WashingtonState
DCZip Code
20003Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10424

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

7.51

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

2671.67

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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. Direct Mail Processors Inc.

Mailing Address 1150 Conrad Court

City
Hagerstown

State
MD

Zip Code
21740

Purpose of Disbursement
Consultant-Direct Mail

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10121

Date of Disbursement

02 / 05 / 2007

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)

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: D9998

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

166.00

☐ 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: D10126

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

167.00

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

SUBTOTAL of Disbursements This Page (optional)

767.00

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. 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: D10187

Date of Disbursement

03 / 05 / 2007

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)

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: D10405

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

793.00

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

Full Name (Last, First, Middle Initial)

C. Eighteenth Street Media

Mailing Address 1473 Florida Ave. NW

City Washington State DC Zip Code 20009

Purpose of Disbursement
Reception - Audio/Visual

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10198

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

6842.00

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

SUBTOTAL of Disbursements This Page (optional)

8382.00

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. 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: D10111

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

60.00

☐ 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 Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10170

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

51.89

☐ 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 Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10171

Date of Disbursement

02 / 28 / 2007

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)

141.89

TOTAL This Period (last page this line number only)

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

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

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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: D9996

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

16.64

☐ 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: D10030

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

15.81

☐ 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: D10081

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

26.12

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

SUBTOTAL of Disbursements This Page (optional)

58.57

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. 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: D10123

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

17.29

☐ 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: D10134

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

27.40

☐ 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: D10160

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

26.65

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

SUBTOTAL of Disbursements This Page (optional)

71.34

TOTAL This Period (last page this line number only)

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

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

Friends of 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: D10158

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

16.16

☐ 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: D10181

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

33.57

☐ 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: D10191

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

8.38

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

SUBTOTAL of Disbursements This Page (optional)

58.11

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. 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: D10403

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

37.11

☐ 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: D10411

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

8.22

☐ 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: D10065

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

1035.57

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

SUBTOTAL of Disbursements This Page (optional)

1080.90

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. 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: D10105

Date of Disbursement

01 / 31 / 2007

Amount of Each Disbursement this Period

1035.57

☐ 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
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10119

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

15.00

☐ 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: D10145

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

1047.02

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

SUBTOTAL of Disbursements This Page (optional)

2097.59

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. 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10153

Date of Disbursement

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

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. 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10166

Date of Disbursement

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

Amount of Each Disbursement this Period

1047.02

☐ 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

Travel

Candidate Name

001

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10183

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	7

Amount of Each Disbursement this Period

216.00

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

SUBTOTAL of Disbursements This Page (optional)

1343.02

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. 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: D10199

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

86.65

☐ 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: D10208

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

1047.02

☐ 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: D10422

Date of Disbursement

03 / 31 / 2007

Amount of Each Disbursement this Period

1047.02

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

SUBTOTAL of Disbursements This Page (optional)

2180.69

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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. Nicholas Jeffrey

Mailing Address 5826 Edgehill Dr.

City
Alexandria

State
VA

Zip Code
22303

Purpose of Disbursement
Consultant-Computer

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10174

Date of Disbursement

03 / 02 / 2007

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. Jewish Voice & Herald

Mailing Address 130 Sessions St.

City
Providence

State
RI

Zip Code
02906

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10139

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

261.00

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

Full Name (Last, First, Middle Initial)

C. Christopher J. Kent

Mailing Address 9 Karen Ann Dr.

City
Smithfield

State
RI

Zip Code
02917

Purpose of Disbursement
Void check issued prior period

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10176

Date of Disbursement

03 / 02 / 2007

Amount of Each Disbursement this Period

-4.00

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

SUBTOTAL of Disbursements This Page (optional)

757.00

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:
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Christopher J. Kent

Mailing Address 9 Karen Ann Dr.

City
Smithfield

State
RI

Zip Code
02917

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10175

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

4.00

☐ 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
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D9990

Date of Disbursement

01 / 01 / 2007

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
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Office rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10109

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

600.00

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

SUBTOTAL of Disbursements This Page (optional)

1204.00

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. 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: D10172

Date of Disbursement

03 / 01 / 2007

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. Matthew Siravo Memorial Foundation

Mailing Address P.O. Box 5300

City
Wakefield

State
RI

Zip Code
02880

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10033

Date of Disbursement

01 / 08 / 2007

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. 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: D9995

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

29.71

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

SUBTOTAL of Disbursements This Page (optional)

879.71

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. MCI Worldcom

Mailing Address P.O. Box 856053

City State Zip Code
Louisville KY 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: D10101

Date of Disbursement

01 / 29 / 2007

Amount of Each Disbursement this Period

31.34

☐ 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 State Zip Code
Louisville KY 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: D10179

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

98.96

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

Full Name (Last, First, Middle Initial)

C. Gregory M. Mecher

Mailing Address 1125 Maryland Ave. NE #6

City State Zip Code
Washington DC 20002

Purpose of Disbursement

Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10148

Date of Disbursement

02 / 15 / 2007

Amount of Each Disbursement this Period

2740.90

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

SUBTOTAL of Disbursements This Page (optional)

2871.20

TOTAL This Period (last page this line number only)

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

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

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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. Gregory M. Mecher

Mailing Address 1125 Maryland Ave. NE #6

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10165

Date of Disbursement

02 / 28 / 2007

Amount of Each Disbursement this Period

2740.90

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

Full Name (Last, First, Middle Initial)

B. Gregory M. Mecher

Mailing Address 1125 Maryland Ave. NE #6

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10196

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

63.25

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

Full Name (Last, First, Middle Initial)

C. Gregory M. Mecher

Mailing Address 1125 Maryland Ave. NE #6

City
Washington

State
DC

Zip Code
20002

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10207

Date of Disbursement

03 / 15 / 2007

Amount of Each Disbursement this Period

2740.90

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

SUBTOTAL of Disbursements This Page (optional)

5545.05

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. Gregory M. Mecher

Mailing Address 1125 Maryland Ave. NE #6

City Washington State DC Zip Code 20002

Purpose of Disbursement
Wages

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10420

Date of Disbursement

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

Amount of Each Disbursement this Period

2740.90

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

Full Name (Last, First, Middle Initial)

B. Morin's Inc.

Mailing Address 95 Frank Mossberg Dr.

City South Attleboro State MA Zip Code 02703

Purpose of Disbursement
Reception - Catering

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10032

Date of Disbursement

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

Amount of Each Disbursement this Period

335.35

☐ 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 - Catering

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10143

Date of Disbursement

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

Amount of Each Disbursement this Period

9814.40

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

SUBTOTAL of Disbursements This Page (optional)

12890.65

TOTAL This Period (last page this line number only)

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

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

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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Mount Fuji Florist Inc.

Mailing Address 182 Academy Ave.

City
Providence

State
RI

Zip Code
02908

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: D10201

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

119.84

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

Full Name (Last, First, Middle Initial)

B. Mount Fuji Florist Inc.

Mailing Address 182 Academy Ave.

City
Providence

State
RI

Zip Code
02908

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: D10402

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

239.68

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

Full Name (Last, First, Middle Initial)

C. Newport St. Patrick's Day Parade Committee

Mailing Address P.O. Box 1404

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10115

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

230.00

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

SUBTOTAL of Disbursements This Page (optional)

589.52

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 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. NGEN LLC

Mailing Address 3142 Dumbarton St. NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Computer Hardware

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10133

Date of Disbursement

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

Amount of Each Disbursement this Period

398.75

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

Full Name (Last, First, Middle Initial)

B. NGEN LLC

Mailing Address 3142 Dumbarton St. NW

City Washington State DC Zip Code 20007

Purpose of Disbursement
Computer Hardware

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10406

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 1 9 / 2 0 0 7

Amount of Each Disbursement this Period

6329.71

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

Full Name (Last, First, Middle Initial)

C. NGP SoftwareMailing Address 5039 Connecticut Ave. NW
Suite 1A

City Washington State DC Zip Code 20008

Purpose of Disbursement
Computer software

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10031

Date of Disbursement

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

Amount of Each Disbursement this Period

1050.00

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

SUBTOTAL of Disbursements This Page (optional)

7778.46

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. 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: D10178

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

832.00

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

Full Name (Last, First, Middle Initial)

B. 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: D10416

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

1200.00

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

Full Name (Last, First, Middle Initial)

C. NRI Community Services

Mailing Address P.O. Box 1700

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: D10037

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional)

2282.00

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. Ocean State Action

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

State: District:

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

Transaction ID: D9994

Date of Disbursement

01 / 02 / 2007

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. Pawtucket Country Club

Mailing Address 900 Armistice Blvd.

City Pawtucket State RI Zip Code 02861

Purpose of Disbursement

Reception - Catering

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D9999

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

889.89

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

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: D10177

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

434.00

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

SUBTOTAL of Disbursements This Page (optional)

1823.89

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Presidential Worldwide Transportation

Mailing Address 4770 Forest St. Unit U

City State Zip Code
 Denver CO 80216

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10412

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

630.00

☐ 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 State Zip Code
 Providence RI 02903

Purpose of Disbursement

Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10034

Date of Disbursement

01 / 08 / 2007

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 State Zip Code
 Providence RI 02903

Purpose of Disbursement

Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10068

Date of Disbursement

01 / 15 / 2007

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)

1480.00

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
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Rhode Island Drug Officers Association

Mailing Address 44 East Ave.
Suite 204

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: D10096

Date of Disbursement

01 / 29 / 2007

Amount of Each Disbursement this Period

399.00

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

Full Name (Last, First, Middle Initial)

B. Rhode Island Trooper Association

Mailing Address 626 Park Ave.
Suite 1A

City Cranston State RI Zip Code 02910

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10135

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

295.00

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

Full Name (Last, First, Middle Initial)

C. RI Dept. of Employment & Training

Mailing Address 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

State: District:

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

Transaction ID: D10092

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

558.84

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

SUBTOTAL of Disbursements This Page (optional)

1252.84

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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. Ryan, Phillips, Utrecht & MacKinnon

Mailing Address 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

State: District:

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

Transaction ID: D10124

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

115.09

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

Full Name (Last, First, Middle Initial)

B. Ryan, Phillips, Utrecht & MacKinnon

Mailing Address 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

State: District:

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

Transaction ID: D10185

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

68.89

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

Full Name (Last, First, Middle Initial)

C. S.S.C. LLC

Mailing Address 155 Polifly Rd.
Suite 103

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10433

Date of Disbursement

02 / 01 / 2007

Amount of Each Disbursement this Period

250.00

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

433.98

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary 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. S.S.C. LLCMailing Address 155 Polifly Rd.
Suite 103

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Postage

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10434

Date of Disbursement

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

Amount of Each Disbursement this Period

150.00

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

* in-kind received

Full Name (Last, First, Middle Initial)

B. Peter K. Shah

Mailing Address 123 Greenbriar Way

City Salinas State CA Zip Code 93907

Purpose of Disbursement
Travel

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10271

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	7

Amount of Each Disbursement this Period

1027.00

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

* in-kind received

Full Name (Last, First, Middle Initial)

C. Slater Mill Historic Site

Mailing Address P.O. Box 696

City Pawtucket State RI Zip Code 02862

Purpose of Disbursement
Reception - Facilities

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10077

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	7

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional)

1777.00

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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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sonia Cleaning Service

Mailing Address 12150 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office cleaning

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10103

Date of Disbursement

01 / 31 / 2007

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 12150 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office cleaning

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10144

Date of Disbursement

02 / 15 / 2007

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 12150 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office cleaning

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10168

Date of Disbursement

02 / 28 / 2007

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**

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. Sonia Cleaning Service

Mailing Address 12150 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office cleaning

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10205

Date of Disbursement

03 / 15 / 2007

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 12150 Jennell Dr.

City
Bristow

State
VA

Zip Code
20136

Purpose of Disbursement
Office cleaning

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10419

Date of Disbursement

03 / 31 / 2007

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. State of Rhode Island

Mailing Address Division of Taxation
One Capitol Hill

City
Providence

State
RI

Zip Code
02908

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: D9997

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

36.10

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

SUBTOTAL of Disbursements This Page (optional)

81.82

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. State of Rhode IslandMailing Address Division of Taxation
One Capitol HillCity State Zip Code
Providence RI 02908Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10127

Date of Disbursement

M M / D D / Y Y Y Y
0 2 / 0 5 / 2 0 0 7

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 IslandMailing Address Division of Taxation
One Capitol HillCity State Zip Code
Providence RI 02908Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10186

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 7

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 IslandMailing Address Division of Taxation
One Capitol HillCity State Zip Code
Providence RI 02908Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10190

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 0 8 / 2 0 0 7

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**

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. Towne House Flowers

Mailing Address 2555 Hartford Ave.

City Johnston State RI Zip Code 02919

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: D10083

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

62.06

☐ 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 Johnston State RI Zip Code 02919

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: D10122

Date of Disbursement

02 / 05 / 2007

Amount of Each Disbursement this Period

115.03

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

Full Name (Last, First, Middle Initial)

C. Eleni F. Tsakopoulos-Kounalakis

Mailing Address 2090 Pacific Ave
Apt 501

City San Francisco State CA Zip Code 94109-2250

Purpose of Disbursement
Reception - Production Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D9989

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

320.00

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

* in-kind received

SUBTOTAL of Disbursements This Page (optional)

497.09

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. 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10091

Date of Disbursement

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

Amount of Each Disbursement this Period

27.97

☐ 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10097

Date of Disbursement

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

Amount of Each Disbursement this Period

26.83

☐ 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10138

Date of Disbursement

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

Amount of Each Disbursement this Period

34.86

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional) ►

89.66

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

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

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

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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: D10150

Date of Disbursement

02 / 19 / 2007

Amount of Each Disbursement this Period

35.08

☐ 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: D10161

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

35.08

☐ 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: D10195

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

50.16

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

SUBTOTAL of Disbursements This Page (optional)

120.32

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary 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. 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10407

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	9	/	2	0	0	7

Amount of Each Disbursement this Period

33.63

☐ 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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10415

Date of Disbursement

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

Amount of Each Disbursement this Period

73.73

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

Full Name (Last, First, Middle Initial)

C. US TreasuryMailing Address Credit Accounting Branch
3700 East - West Highway

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10061

Date of Disbursement

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

Amount of Each Disbursement this Period

1710.60

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

SUBTOTAL of Disbursements This Page (optional)

1817.96

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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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. US TreasuryMailing Address Credit Accounting Branch
3700 East - West Highway

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10095

Date of Disbursement

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

Amount of Each Disbursement this Period

41.33

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

Full Name (Last, First, Middle Initial)

B. US TreasuryMailing Address Credit Accounting Branch
3700 East - West Highway

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10130

Date of Disbursement

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

Amount of Each Disbursement this Period

1230.19

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

Full Name (Last, First, Middle Initial)

C. US TreasuryMailing Address Credit Accounting Branch
3700 East - West Highway

City Hyattsville State MD Zip Code 20782

Purpose of Disbursement
Payroll taxes/withholdings

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10203

Date of Disbursement

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

Amount of Each Disbursement this Period

4295.10

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

SUBTOTAL of Disbursements This Page (optional)

5566.62

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary 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. Verdolino & Lowey, P.C.

Mailing Address 124 Washington St. #101

City	State	Zip Code
Foxboro	MA	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: D9991

Date of Disbursement

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

Amount of Each Disbursement this Period

7126.00

☐ 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	State	Zip Code
Foxboro	MA	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: D10110

Date of Disbursement

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

Amount of Each Disbursement this Period

7063.81

☐ 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	State	Zip Code
Foxboro	MA	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: D10173

Date of Disbursement

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

Amount of Each Disbursement this Period

7011.25

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

SUBTOTAL of Disbursements This Page (optional)

21201.06

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. Verizon Wireless

Mailing Address P.O. Box 41556

City
PhiladelphiaState
PAZip Code
19101Purpose of Disbursement
Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10074

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

52.11

☐ 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
PhiladelphiaState
PAZip Code
19101Purpose of Disbursement
Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10082

Date of Disbursement

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

Amount of Each Disbursement this Period

133.42

☐ 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
PhiladelphiaState
PAZip Code
19101Purpose of Disbursement
Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10102

Date of Disbursement

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

Amount of Each Disbursement this Period

213.55

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

SUBTOTAL of Disbursements This Page (optional)

399.08

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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☐ 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. 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: D10099

Date of Disbursement

01 / 29 / 2007

Amount of Each Disbursement this Period

49.82

☐ 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: D10152

Date of Disbursement

02 / 19 / 2007

Amount of Each Disbursement this Period

127.15

☐ 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: D10159

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

56.37

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

SUBTOTAL of Disbursements This Page (optional)

233.34

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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. 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: D10184

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

333.37

☐ 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: D10404

Date of Disbursement

03 / 19 / 2007

Amount of Each Disbursement this Period

123.96

☐ 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: D10417

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

450.68

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

SUBTOTAL of Disbursements This Page (optional)

908.01

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

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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. 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: D10413

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

53.52

☐ 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 Lehigh Valley State PA Zip Code 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: D10079

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

82.15

☐ 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 Lehigh Valley State PA Zip Code 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: D10084

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

201.45

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

SUBTOTAL of Disbursements This Page (optional)

337.12

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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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. 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: D10151

Date of Disbursement

02 / 19 / 2007

Amount of Each Disbursement this Period

86.81

☐ 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: D10157

Date of Disbursement

02 / 26 / 2007

Amount of Each Disbursement this Period

235.09

☐ 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: D10202

Date of Disbursement

03 / 12 / 2007

Amount of Each Disbursement this Period

85.31

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

SUBTOTAL of Disbursements This Page (optional)

407.21

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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☒ 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. Verizon

Mailing Address P.O. Box 28007

City
Lehigh Valley

State
PA

Zip Code
18002

Purpose of Disbursement
Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10414

Date of Disbursement

03 / 26 / 2007

Amount of Each Disbursement this Period

280.69

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

Full Name (Last, First, Middle Initial)

B. Veterans of Foreign Wars of the United States

Mailing Address Dept. of Rhode Island
83 Park St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Advertisement

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10069

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

295.00

☐ 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

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

State: District:

Transaction ID: D10064

Date of Disbursement

01 / 15 / 2007

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)

1198.09

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. 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: D10104

Date of Disbursement

01 / 31 / 2007

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: D10146

Date of Disbursement

02 / 15 / 2007

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: D10164

Date of Disbursement

02 / 28 / 2007

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**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. George Zainyeh

Mailing Address 433 Seaside Dr.

City
JamestownState
RIZip Code
02835Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10206

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

☐ 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
JamestownState
RIZip Code
02835Purpose of Disbursement
Wages

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10421

Date of Disbursement

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

Amount of Each Disbursement this Period

☐ 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
NewarkState
NJZip Code
07101Purpose of Disbursement
Credit Card - See Below if Itemized

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10000

Date of Disbursement

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

Amount of Each Disbursement this Period

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

SUBTOTAL of Disbursements This Page (optional)

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. American Express

Mailing Address P.O. Box 1270

City
Newark

State
NJ

Zip Code
07101

Purpose of Disbursement
Dues

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10021

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

35.00

☐ 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
Baltimore

State
MD

Zip Code
21263

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10001

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

931.75

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Island Books

Mailing Address 575 East Main Rd.

City
Middletown

State
RI

Zip Code
02842

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: D10029

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

133.49

☐ 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:
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
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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 138 Connell Highway

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10013

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

33.35

☐ 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: D10023

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

21.47

☐ 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 138 Connell Highway

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10008

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

18.15

☐ 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:
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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 138 Connell Highway

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: D10002

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

29.40

☐ 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 138 Connell Highway

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: D10019

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

33.30

☐ 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 138 Connell Highway

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: D10017

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

29.00

☐ 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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☒ 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. 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: D10028

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

166.60

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. 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: D10012

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

149.85

☐ 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: D10024

Date of Disbursement

01 / 03 / 2007

Amount of Each Disbursement this Period

199.90

☐ 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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☒ 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

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: D10038

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

1341.82

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

Full Name (Last, First, Middle Initial)

B. Biltmore Hotel

Mailing Address 11 Dorrance St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10040

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

280.77

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Biltmore Hotel

Mailing Address 11 Dorrance St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10039

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

302.40

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

1341.82

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. Biltmore Hotel

Mailing Address 11 Dorrance St.

City
ProvidenceState
RIZip Code
02903Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10041

Date of Disbursement

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

Amount of Each Disbursement this Period

376.71

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Holiday Inn

Mailing Address 901 Jefferson Blvd.

City
WarwickState
RIZip Code
02886Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10042

Date of Disbursement

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

Amount of Each Disbursement this Period

381.94

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. 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
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10045

Date of Disbursement

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

Amount of Each Disbursement this Period

5092.73

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional)

5092.73

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Azure Restaurant

Mailing Address 61 Exeter St.

City
Boston

State
MA

Zip Code
02116

Purpose of Disbursement
Meeting expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10059

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

351.22

☐ 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
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10055

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

30.00

☐ 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
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10056

Date of Disbursement

01 / 08 / 2007

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

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. Chop House

Mailing Address 509 7th St. NW

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: D10058

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

408.26

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Holiday Inn

Mailing Address 1127 Route 132

City Hyannis State MA Zip Code 02601

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10047

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

174.42

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. John F. Kennedy Library Museum Store

Mailing Address Columbia Point

City Boston State MA Zip Code 02125

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: D10051

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

675.00

☐ 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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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. John F. Kennedy Library Museum Store

Mailing Address Columbia Point

City
Boston

State
MA

Zip Code
02125

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: D10053

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

928.50

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. John F. Kennedy Library Museum Store

Mailing Address Columbia Point

City
Boston

State
MA

Zip Code
02125

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: D10052

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

742.50

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. John F. Kennedy Library Museum Store

Mailing Address Columbia Point

City
Boston

State
MA

Zip Code
02125

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: D10054

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

1317.50

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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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. Valley Forge Hilton

Mailing Address 251 West DeKalb Pike

City State Zip Code
King Of Prussia PA 19406

Purpose of Disbursement

Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10049

Date of Disbursement

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

Amount of Each Disbursement this Period

190.12

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 15505 Sand Canyon Ave.

City State Zip Code
Irvine CA 92618

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10050

Date of Disbursement

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

Amount of Each Disbursement this Period

73.50

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Citibank VISA

Mailing Address P.O. Box 8101

City State Zip Code
South Hackensack NJ 07606

Purpose 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: D10075

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	7

Amount of Each Disbursement this Period

246.57

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**SUBTOTAL** of Disbursements This Page (optional)

246.57

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. Valley Forge Hilton

Mailing Address 251 West DeKalb Pike

City State Zip Code
King Of Prussia PA 19406

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10076

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

246.57

☐ 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: D10087

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

825.50

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

Full Name (Last, First, Middle Initial)

C. Island Books

Mailing Address 575 East Main Rd.

City State Zip Code
Middletown RI 02842

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: D10088

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

133.49

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

825.50

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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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. Westin Hotel

Mailing Address One Exchange St.

City
Providence

State
RI

Zip 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: D10089

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

352.84

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Westin Hotel

Mailing Address One Exchange St.

City
Providence

State
RI

Zip 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: D10090

Date of Disbursement

01 / 22 / 2007

Amount of Each Disbursement this Period

339.17

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. 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

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10142

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

18636.12

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

SUBTOTAL of Disbursements This Page (optional)

18636.12

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. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10282

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

296.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10292

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

173.00

☐ 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

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10294

Date of Disbursement

02 / 12 / 2007

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 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. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10247

Date of Disbursement

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

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)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10246

Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

☐ 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
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10245

Date of Disbursement

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

Amount of Each Disbursement this Period

90.00

☐ 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 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. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10295

Date of Disbursement

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

Amount of Each Disbursement this Period

30.00

☐ 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
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10251

Date of Disbursement

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

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
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10248

Date of Disbursement

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

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
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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
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10290

Date of Disbursement

02 / 12 / 2007

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)

B. Columbia Floral Gallery

Mailing Address 534 23rd St. NW

City Washington State DC Zip Code 20037

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: D10226

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

95.18

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Columbia Floral Gallery

Mailing Address 534 23rd St. NW

City Washington State DC Zip Code 20037

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: D10225

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

116.33

☐ 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. Gregg's Restaurant

Mailing Address 1303 N. Main St.

City
Providence

State
RI

Zip Code
02904

Purpose of Disbursement
Meeting expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10233

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

29.25

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Hotel Viking

Mailing Address 1 Bellevue Ave.

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Reception - Catering

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10258

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

1500.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Hotel Viking

Mailing Address 1 Bellevue Ave.

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Reception - Catering

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10286

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

5375.85

☐ 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)

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. John F. Kennedy Library Museum Store

Mailing Address Columbia Point

City Boston State MA Zip Code 02125

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: D10228

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

295.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Kinko's

Mailing Address 236 Meeting St.

City Providence State RI Zip Code 02906

Purpose of Disbursement
Printing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10269

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

620.59

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Kinko's

Mailing Address 236 Meeting St.

City Providence State RI Zip Code 02906

Purpose of Disbursement
Printing

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10255

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

38.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. LaForge Restaurant

Mailing Address 186 Bellevue Ave.

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Meeting expense

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10277

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

408.05

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Lucky Strike

Mailing Address 701 Seventh St. NW

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Reception - Facilities

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10237

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

2000.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Northwest Airlines

Mailing Address 801 Greenwich Ave.

City
Eagan

State
MN

Zip Code
55121

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10249

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

1375.42

☐ 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. Northwest Airlines

Mailing Address 801 Greenwich Ave.

City Eagan State MN Zip Code 55121

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10250

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

702.41

☐ 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 138 Connell Highway

City Newport State RI Zip Code 02840

Purpose of Disbursement

Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10266

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

19.45

☐ 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 138 Connell Highway

City Newport State RI Zip Code 02840

Purpose of Disbursement

Gasoline

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10223

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

28.00

☐ 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)
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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
Newspapers-Periodicals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10261

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

7.98

☐ 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 138 Connell Highway

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: D10216

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

21.50

☐ 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 138 Connell Highway

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: D10234

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

18.35

☐ 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 138 Connell Highway

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: D10252

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

32.30

☐ 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 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: D10267

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

27.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Shell

Mailing Address 3319 Post Rd.

City Warwick State RI Zip Code 02886

Purpose of Disbursement

Newspapers-Periodicals

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10215

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

7.31

☐ 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. 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: D10240

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

202.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. 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: D10241

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

395.60

☐ 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: D10242

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

197.80

☐ 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)
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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 State Zip Code
 Dallas TX 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: D10243

Date of Disbursement

/ /

Amount of Each Disbursement this Period

214.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Southwest Airlines

Mailing Address P.O. Box 36611

City State Zip Code
 Dallas TX 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: D10244

Date of Disbursement

/ /

Amount of Each Disbursement this Period

385.60

☐ 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 State Zip Code
 Dallas TX 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: D10288

Date of Disbursement

/ /

Amount of Each Disbursement this Period

236.80

☐ 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**

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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: D10289

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

236.80

☐ 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: D10213

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

100.01

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Surroundings Florist

Mailing Address Shaker Pine Plaza

City Albany State NY Zip Code 12205

Purpose of Disbursement

Reception - Flowers

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10211

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

153.35

☐ 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 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. Thrifty Car Rental

Mailing Address 2329 Post Rd.

City
WarwickState
RIZip Code
02888Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10287

Date of Disbursement

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

Amount of Each Disbursement this Period

242.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Treehouse Productions

Mailing Address 812 Charles St.

City
ProvidenceState
RIZip Code
02904Purpose of Disbursement
Reception - Audio/Visual

Candidate Name

007

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10285

Date of Disbursement

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

Amount of Each Disbursement this Period

513.10

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. US AirwaysMailing Address Crystal Park 4
3345 Crystal Dr.City
ArlingtonState
VAZip Code
22227Purpose of Disbursement
Travel

Candidate Name

002

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10259

Date of Disbursement

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

Amount of Each Disbursement this Period

65.00

☐ 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

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. 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: D10219

Date of Disbursement

/ /

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. Verizon Wireless

Mailing Address 1744 L St. NW

City State Zip Code
Washington DC 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: D10263

Date of Disbursement

/ /

Amount of Each Disbursement this Period

158.61

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Walmart

Mailing Address 199 Connell Hwy

City State Zip Code
Newport RI 02840

Purpose of Disbursement
Reception - Meal Supplies

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10276

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5.03

☐ 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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<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. Yesterday's & The Place

Mailing Address 28 Washington Sq.

City
NewportState
RIZip Code
02840Purpose of Disbursement
Reception - Catering

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10270

Date of Disbursement

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

Amount of Each Disbursement this Period

643.73

☐ 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
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: D10162

Date of Disbursement

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

Amount of Each Disbursement this Period

362.41

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

Full Name (Last, First, Middle Initial)

C. Hotel Viking

Mailing Address 1 Bellevue Ave.

City
NewportState
RIZip Code
02840Purpose of Disbursement
Reception - Travel

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10163

Date of Disbursement

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

Amount of Each Disbursement this Period

362.41

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

SUBTOTAL of Disbursements This Page (optional)

362.41

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<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: D10204

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

22355.81

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

Full Name (Last, First, Middle Initial)

B. Alaska Airlines

Mailing Address 10630 NE 8th St.

City
BellevueState
WAZip Code
98004Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10301

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

499.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Alaska Airlines

Mailing Address 10630 NE 8th St.

City
BellevueState
WAZip Code
98004Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10300

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

499.40

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)

22355.81

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Alaska Airlines

Mailing Address 10630 NE 8th St.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10302

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

499.40

☐ 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 Worth State TX Zip Code 76155

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10342

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

739.80

☐ 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

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10314

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

757.40

☐ 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)
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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 Worth State TX Zip Code 76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10316

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

744.40

☐ 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 Worth State TX Zip Code 76155

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10341

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

739.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 1270

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Dues

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10313

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

35.00

☐ 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)
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10374

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

176.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10309

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

102.00

☐ 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 Washington State DC Zip Code 20003

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10362

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

162.00

☐ 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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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10375

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

86.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Amtrak

Mailing Address 110 N. Carolina Ave. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10391

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

32.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Capitol Hill Suites

Mailing Address 200 C St. NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10303

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

250.76

☐ 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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☐ 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. Capitol Hill Suites

Mailing Address 200 C St. NW

City
Washington

State
DC

Zip Code
20001

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10307

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

258.26

☐ 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
Baltimore

State
MD

Zip Code
21263

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10392

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

200.50

☐ 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
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10383

Date of Disbursement

03 / 14 / 2007

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
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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. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10317

Date of Disbursement

03 / 14 / 2007

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)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10308

Date of Disbursement

03 / 14 / 2007

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)

C. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10299

Date of Disbursement

03 / 14 / 2007

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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☐ 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. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10367

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

30.00

☐ 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
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10318

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

30.00

☐ 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
Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10330

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

15.00

☐ 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)
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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
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10298

Date of Disbursement

03 / 14 / 2007

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)

B. Carroll Travel

Mailing Address 201 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10346

Date of Disbursement

03 / 14 / 2007

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)

C. Continental Airlines

Mailing Address P.O. Box 4607

City Houston State TX Zip Code 77210

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10336

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

279.80

☐ 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)
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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Frontier Airlines

Mailing Address 7001 Tower Rd.

City State Zip Code
 Denver CO 80249

Purpose of Disbursement
 Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10363

Date of Disbursement

/ /

Amount of Each Disbursement this Period

223.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Frontier Airlines

Mailing Address 7001 Tower Rd.

City State Zip Code
 Denver CO 80249

Purpose of Disbursement
 Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10337

Date of Disbursement

/ /

Amount of Each Disbursement this Period

276.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Frontier Airlines

Mailing Address 7001 Tower Rd.

City State Zip Code
 Denver CO 80249

Purpose of Disbursement
 Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10335

Date of Disbursement

/ /

Amount of Each Disbursement this Period

276.40

☐ 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)
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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. 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
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

36.04

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Hertz Car Rental

Mailing Address 544 Airport Rd.

City
WarwickState
RIZip Code
02886Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10385

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

219.92

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Hertz Car Rental

Mailing Address 9445 NE Airport Way

City
PortlandState
ORZip Code
97220Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10354

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

317.91

☐ 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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<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. Hotel Monaco

Mailing Address 506 SW Washington

City
PortlandState
ORZip Code
97204Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10358

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	7

Amount of Each Disbursement this Period

257.38

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

B. Hotel Monaco

Mailing Address 506 SW Washington

City
PortlandState
ORZip Code
97204Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10355

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	7

Amount of Each Disbursement this Period

167.63

☐ Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

C. Hotel Monaco

Mailing Address 506 SW Washington

City
PortlandState
ORZip Code
97204Purpose of Disbursement
Travel

Candidate Name

002
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10356

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	7

Amount of Each Disbursement this Period

191.03

☐ 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. Hotel Viking

Mailing Address 1 Bellevue Ave.

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Reception - Travel refund

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10325

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

-258.99

☐ 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 1209 I St.

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10357

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

303.59

☐ 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 1209 I St.

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10360

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

314.68

☐ 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. Hyatt Hotel

Mailing Address 1209 I St.

City
Sacramento

State
CA

Zip Code
95814

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10359

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

270.88

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Jennings Car Care Center Inc.

Mailing Address 679 Quaker Ln.

City
West Warwick

State
RI

Zip Code
02893

Purpose of Disbursement
Vehicle maintenance

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10306

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

826.03

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Lucky Strike

Mailing Address 701 Seventh St. NW

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Reception - Facilities

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10347

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

2040.00

☐ 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 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. Northwest Airlines

Mailing Address 801 Greenwich Ave.

City Eagan	State MN	Zip Code 55121
---------------	-------------	-------------------

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10297

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

452.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Providence Newspaper Guild

Mailing Address 270 Westminster St. 2nd Fl.

City Providence	State RI	Zip Code 02903
--------------------	-------------	-------------------

Purpose of Disbursement

Advertisement

Candidate Name

004

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10304

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

550.00

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Rent-A-PC

Mailing Address 265 Oser Ave.

City Hauppauge	State NY	Zip Code 11788
-------------------	-------------	-------------------

Purpose of Disbursement

Computer

Candidate Name

001

Category/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10381

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	7

Amount of Each Disbursement this Period

232.50

☐ Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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

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. Rent-A-PC

Mailing Address 265 Oser Ave.

City Hauppauge State NY Zip Code 11788

Purpose of Disbursement
Computer

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10320

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

114.14

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Rent-A-PC

Mailing Address 265 Oser Ave.

City Hauppauge State NY Zip Code 11788

Purpose of Disbursement
Computer

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10322

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

428.00

☐ 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 138 Connell Highway

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: D10377

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

18.10

☐ 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

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. 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: D10401

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

28.80

☐ 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: D10387

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

20.00

☐ 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 138 Connell Highway

City
Newport

State
RI

Zip Code
02840

Purpose of Disbursement
Gasoline

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10332

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

22.00

☐ 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)
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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. Sheraton Hotel

Mailing Address 1 Dock St.

City
Philadelphia

State
PA

Zip Code
19106

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10399

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

333.47

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Sheraton Hotel

Mailing Address 1 Dock St.

City
Philadelphia

State
PA

Zip Code
19106

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10398

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

205.65

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Sheraton Hotel

Mailing Address 1 Dock St.

City
Philadelphia

State
PA

Zip Code
19106

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10397

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

192.30

☐ 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**

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. Sir Francis Drake Hotel

Mailing Address 450 Powell St.

City
San Francisco

State
CA

Zip Code
94102

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10371

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

189.94

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Sir Francis Drake Hotel

Mailing Address 450 Powell St.

City
San Francisco

State
CA

Zip Code
94102

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10372

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

181.26

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Sir Francis Drake Hotel

Mailing Address 450 Powell St.

City
San Francisco

State
CA

Zip Code
94102

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10373

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

281.30

☐ 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**

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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

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10333

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

240.80

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. 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: D10345

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

457.20

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Surroundings Florist

Mailing Address Shaker Pine Plaza

City
Albany

State
NY

Zip Code
12205

Purpose of Disbursement
Reception - Flowers

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10321

Date of Disbursement

02 / 12 / 2007

Amount of Each Disbursement this Period

126.26

☐ 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. Surroundings Florist

Mailing Address Shaker Pine Plaza

City Albany State NY Zip Code 12205

Purpose of Disbursement
Reception - Flowers

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10365

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

126.26

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Surroundings Florist

Mailing Address Shaker Pine Plaza

City Albany State NY Zip Code 12205

Purpose of Disbursement
Reception - Flowers

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10364

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

126.26

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Surroundings Florist

Mailing Address Shaker Pine Plaza

City Albany State NY Zip Code 12205

Purpose of Disbursement
Reception - Flowers

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10312

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

126.26

☐ 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. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10343

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

302.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10340

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

302.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10339

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

302.40

☐ 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 Page

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NAME OF COMMITTEE (In Full)

Friends of Patrick J. Kennedy Inc.

Full Name (Last, First, Middle Initial)

A. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10338

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

719.40

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. United Airlines

Mailing Address P.O. Box 66100

City
Chicago

State
IL

Zip Code
60666

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10315

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

774.40

☐ 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: D10319

Date of Disbursement

02 / 12 / 2007

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)
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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 15505 Sand Canyon Ave.

City Irvine State CA Zip Code 92618

Purpose of Disbursement

Telephone

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10334

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

31.71

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Verizon Wireless

Mailing Address 1744 L 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: D10326

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

272.48

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Westin Hotel

Mailing Address 1672 Lawrence St.

City Denver State CO Zip Code 80202

Purpose of Disbursement

Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10378

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

353.25

☐ 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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☒ 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. Westin Hotel

Mailing Address 1672 Lawrence St.

City State Zip Code
 Denver CO 80202

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10379

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

361.96

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Westin Hotel

Mailing Address 1672 Lawrence St.

City State Zip Code
 Denver CO 80202

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10380

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

308.95

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Westin Hotel

Mailing Address One Exchange St.

City State Zip Code
 Providence RI 02903

Purpose of Disbursement

Travel

Candidate Name

002

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10389

Date of Disbursement

03 / 14 / 2007

Amount of Each Disbursement this Period

419.09

☐ 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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<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. Westin Hotel

Mailing Address One Exchange St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D10390

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	7	

Amount of Each Disbursement this Period

355.34

☐ 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)

190218.92

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. Greg C. Amadon

Mailing Address 120 39th Ave. East

City
Seattle

State
WA

Zip Code
98112

Purpose of Disbursement

Void refund check issued prior period

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10107

Date of Disbursement

01 / 07 / 2007

Amount of Each Disbursement this Period

-900.00

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

Full Name (Last, First, Middle Initial)

B. Greg C. Amadon

Mailing Address 120 39th Ave. East

City
Seattle

State
WA

Zip Code
98112

Purpose of Disbursement

Refund of contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10108

Date of Disbursement

01 / 08 / 2007

Amount of Each Disbursement this Period

900.00

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

Full Name (Last, First, Middle Initial)

C. Weiner & Katz LLC

Mailing Address 301 South Livingston Ave.
Suite 101

City
Livingston

State
NJ

Zip Code
07039

Purpose of Disbursement

Refund of contribution

Candidate Name

010
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10182

Date of Disbursement

03 / 05 / 2007

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

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. City Year Inc.

Mailing Address 77 Eddy St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10129

Date of Disbursement

02 / 05 / 2007

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. Courtney for Congress

Mailing Address 38 Risley Rd.

City
Vernon

State
CT

Zip Code
06066

Purpose of Disbursement
Contribution

Candidate Name
Joseph Courtney

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 02

Transaction ID: D10430

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City
Washington

State
DC

Zip Code
20003

Purpose of Disbursement
Void check issued prior period

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D10432

Date of Disbursement

02 / 02 / 2007

Amount of Each Disbursement this Period

-10000.00

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

SUBTOTAL of Disbursements This Page (optional)

-8500.00

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. 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

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D10426

Date of Disbursement

03 / 28 / 2007

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. Joe Donnelly for Congress

Mailing Address P.O. Box 1961

City South Bend State IN Zip Code 46634

Purpose of Disbursement
Contribution

Candidate Name
Joseph Donnelly

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: IN District: 02

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

Transaction ID: D10427

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. Kagen 4 Congress

Mailing Address 100 W. College Ave.
#50D

City Appleton State WI Zip Code 54911

Purpose of Disbursement
Contribution

Candidate Name
Steven Kagen

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: WI District: 08

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

Transaction ID: D10429

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional)

17000.00

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. Loeb sack for Congress

Mailing Address P.O. Box 1457

City
Iowa City

State
IA

Zip Code
52244

Purpose of Disbursement
Contribution

Candidate Name
David Loeb sack

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: IA District: 02

Transaction ID: D10428

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

B. Minister's Alliance of Rhode Island

Mailing Address P.O. Box 20375

City
Providence

State
RI

Zip Code
02920

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D9993

Date of Disbursement

01 / 02 / 2007

Amount of Each Disbursement this Period

350.00

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

Full Name (Last, First, Middle Initial)

C. Providence Performing Arts Center

Mailing Address 220 Weybosset St.

City
Providence

State
RI

Zip Code
02903

Purpose of Disbursement
Donation

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Transaction ID: D10035

Date of Disbursement

01 / 08 / 2007

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)

1650.00

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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<input 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 checked="" 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. Tim Mahoney for Florida

Mailing Address 4114 Northlake Blvd. #300

City
Palm Beach Gardens

State
FL

Zip Code
33410

Purpose of Disbursement
Contribution

Candidate Name
Tim Mahoney

011
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: FL

District: 16

Transaction ID: D10418

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

11150.00

Form/Schedule: **F3A**

Transaction ID:

April Quarterly Report (01/01/07 – 03/31/07), ID #C00326140. This amended report is in response to questions raised by the Federal Election Commission's notification dated 05/22/07 regarding the "Purpose of Disbursement" as reported on Schedule B, Line 21. The entries in question refer to contributions to Federal candidates. The Committee's reporting software automatically completes the "Purpose of Disbursement" field with the Federal candidate's election year, state, office sought, district (if applicable) and election. Per a conversation with Campaign Finance Analyst Chris Jones, the Committee manually changed this information to the recommended wording of "Contribution".
