

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

AUG 29 12 12 PM '96

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Keefe For Congress 1996		2. FEC IDENTIFICATION NUMBER C 00318055
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported. 708 Elm Street		
CITY, STATE and ZIP CODE Manchester, N.H. 03101	STATE/DISTRICT NH/01	
3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
- ☒ 12-Day Pre-Election Report for the Primary (Type of Election)
election on 9/10/96 in the State of New Hampshire
- ☐ July 15 Quarterly Report
- ☐ 30-Day Post-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ October 15 Quarterly Report
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)
- ☐ Termination Report
- This report contains activity for ☒ Primary Election ☐ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>7/1/96</u> through <u>8/21/96</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	99,280.00	214,390.00
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	99,280.00	214,390.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	74,854.33	99,917.64
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	74,854.33	99,917.64
8. Cash on Hand at Close of Reporting Period (from Line 27)	114,472.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information
contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 EDWARD W. STEWART	Date 8/24/96
Signature of Treasurer <i>Edward W. Stewart</i>	

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

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) <u>Keefe For Congress 1996</u>		Report Covering the Period: From: <u>7/1/96</u> To: <u>8/21/96</u>	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		57,815.00	
(ii) Unitemized		565.00	
(iii) Total of contributions from individuals		58,380.00	151,990.00
(b) Political Party Committees		0	
(c) Other Political Committees (such as PACs)		40,900.00	62,400.00
(d) The Candidate		0	
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))		99,280.00	214,390.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0	0
13. LOANS:			
(a) Made or Guaranteed by the Candidate		0	0
(b) All Other Loans		0	0
(c) TOTAL LOANS (add 13(a) and (b))		0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		0	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		99,280.00	214,390.00
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		74,854.33	99,917.64
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0	0
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		0	0
(b) Of All Other Loans		0	0
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		0	0
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		0	0
(b) Political Party Committees		0	0
(c) Other Political Committees (such as PACs)		0	0
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))		0	0
21. OTHER DISBURSEMENTS		0	0
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)		74,854.33	99,917.64

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	90,046.69
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	99,280.00
25. SUBTOTAL (add Line 23 and Line 24)	\$	189,326.69
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	74,854.33
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)	\$	114,472.36

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Keystone Press 9 Old Falls Rd. Manchester, N.H. 03103	printing expenses	7/10/96	786.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7/15/96	498.00
	<input type="checkbox"/> Other (specify)	7/24/96	193.00
Keystone Press 9 Old Falls Rd. Manchester, N.H. 03103	printing expenses	7/26/96	269.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/14/96	326.00
	<input type="checkbox"/> Other (specify)		
NYNEX 900 Elm St. Manchester, N.H. 03101	telephone charges	7/1/96	361.11
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7/25/96	685.51
	<input type="checkbox"/> Other (specify)	8/9/96	811.16
Future Microsystems, Inc. P.O. Box 1327 Londonderry, N.H. 03053	computer lease	7/8/96	543.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/14/96	543.00
	<input type="checkbox"/> Other (specify)		
Fundraising Management Group Inc. 501 Capitol Court, N.E. Suite 200 Washington, D.C. 20002	fundraising consulting	7/25/96	3,150.96
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/9/96	2,865.88
	<input type="checkbox"/> Other (specify)		
Elcom Supply Company 297 D.W. Highway Merrimack, N.H. 03054	telephone rental	7/8/96	175.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/9/96	315.00
	<input type="checkbox"/> Other (specify)		
Liz Pundy 3 Pleasant St., Apt 6. Concord, N.H. 03301	consulting services	7/1/96	350.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	7/8/96	350.00
	<input type="checkbox"/> Other (specify)	7/15/96	350.00
Liz Pundy 3 Pleasant St., Apt 6 Concord, N.H. 03301	consulting services	7/29/96	350.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/5/96	350.00
	<input type="checkbox"/> Other (specify)	8/11/96	350.00
Merrimack Restaurant 786 Elm St. Manchester, N.H. 03101	office rental	7/15/96	500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	8/15/96	500.00
	<input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

14,972.62

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

PAGE 2 OF 6
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code Maura Keefe 126 High Ridge Rd. Manchester, N.H. 03104	Purpose of Disbursement CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/8/96 7/15/96 7/22/96	Amount of Each Disbursement This Period 1,600.00 800.00 800.00
B. Full Name, Mailing Address and ZIP Code Maura Keefe 126 High Ridge Rd. Manchester, N.H. 03104	Purpose of Disbursement CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/29/96 8/5/96 8/11/96	Amount of Each Disbursement This Period 800.00 800.00 800.00
C. Full Name, Mailing Address and ZIP Code Sean O'Reilly 6 Carriage Dr. Exeter, N.H. 03833	Purpose of Disbursement CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/1/96 7/8/96 7/15/96 7/22/96	Amount of Each Disbursement This Period 350.00 350.00 350.00 350.00
D. Full Name, Mailing Address and ZIP Code Sean O'Reilly 6 Carriage Dr. Exeter, N.H. 03833	Purpose of Disbursement CONSULTING SERVICES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/29/96 8/5/96 8/11/96	Amount of Each Disbursement This Period 350.00 350.00 350.00
E. Full Name, Mailing Address and ZIP Code Granite State Office Supplies, Inc. 99 Elm St. Manchester, N.H. 03101	Purpose of Disbursement OFFICE SUPPLIES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/5/96 8/16/96	Amount of Each Disbursement This Period 25.78 15.69
F. Full Name, Mailing Address and ZIP Code Sonja Lambert 145 Lakeside Dr. Manchester, N.H. 03104	Purpose of Disbursement CATERING Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/15/96	Amount of Each Disbursement This Period 600.00
G. Full Name, Mailing Address and ZIP Code Srmard Printing 15 Market Square LYNN, MA 01905	Purpose of Disbursement PRINTING SIGNS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/25/96	Amount of Each Disbursement This Period 300.00
H. Full Name, Mailing Address and ZIP Code Exeter Parks and Recreation 32 Court St. Exeter, N.H. 03833	Purpose of Disbursement PICNIC TICKETS Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/5/96	Amount of Each Disbursement This Period 27.00
I. Full Name, Mailing Address and ZIP Code FEDEX 70 Industrial Drive Londonerry, N.H.	Purpose of Disbursement MAIL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/5/96	Amount of Each Disbursement This Period 27.75

SUBTOTAL of Disbursements This Page (optional)

9,045.72

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code Colin Moore 38 1/2 South Spring St. Concord, N.H. 03301	Purpose of Disbursement consulting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/8/96 7/15/96 7/22/96	Amount of Each Disbursement This Period 700.00 350.00 350.00
B. Full Name, Mailing Address and ZIP Code Colin Moore 38 1/2 South Spring St. Concord, N.H. 03301	Purpose of Disbursement consulting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/29/96 8/5/96 8/11/96	Amount of Each Disbursement This Period 350.00 350.00 350.00
C. Full Name, Mailing Address and ZIP Code Dunfee's Aboard the John Wanamaker 1 Harbour Place Portsmouth, N.H. 03801	Purpose of Disbursement food and beverage for fundraiser Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/8/96	Amount of Each Disbursement This Period 1126.59
D. Full Name, Mailing Address and ZIP Code AT&T	Purpose of Disbursement telephone charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/8/96 8/9/96	Amount of Each Disbursement This Period 204.61 418.98
E. Full Name, Mailing Address and ZIP Code Neighborhood Publications, Inc. P.O. Box 10848 Bedford, N.H. 03810-0848	Purpose of Disbursement newspaper subscriptions Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/8/96	Amount of Each Disbursement This Period 64.00
F. Full Name, Mailing Address and ZIP Code Merrimack Valley Business Machines, Inc. P.O. Box 336 N. Chelmsford, MA 01863	Purpose of Disbursement copier supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/25/96	Amount of Each Disbursement This Period 34.05
G. Full Name, Mailing Address and ZIP Code Steven Bouchard 178 Hazeltone Ct. Manchester, N.H. 03107	Purpose of Disbursement consulting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/15/96 7/22/96	Amount of Each Disbursement This Period 500.00 500.00
H. Full Name, Mailing Address and ZIP Code Steven Bouchard 178 Hazeltone Ct. Manchester, N.H. 03103	Purpose of Disbursement consulting services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 7/29/96 8/5/96 8/11/96	Amount of Each Disbursement This Period 500.00 500.00 500.00
I. Full Name, Mailing Address and ZIP Code The Velocita Company 385 Court St., Suite 210 Plymouth, MA 02360	Purpose of Disbursement commercial production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year) 8/1/96	Amount of Each Disbursement This Period 8,156.28

SUBTOTAL of Disbursements This Page (optional)

14,954.51

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fenn King Murphy Putnam Communications 1043 Cecil Place, N.W. Washington, D.C. 20007.	Media time Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/96 8/13/96	9,272.07 8,325.00
B. Full Name, Mailing Address and ZIP Code William N. Fish 693 Maple St. Manchester, N.H. 03104	photography Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/96	443.00
C. Full Name, Mailing Address and ZIP Code North End Superette 1308 Elm St. Manchester, N.H. 03101	liquor for fundraise Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/15/96	177.64
D. Full Name, Mailing Address and ZIP Code Stratford County Democratic Committee 87A Charles St. Rochester, N.H. 03867	picnic tickets Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/96	15.00
E. Full Name, Mailing Address and ZIP Code Staples 589 Elm St. Manchester, N.H. 03101	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/10/96 7/14/96 7/15/96	7.96 7.96 535.73
F. Full Name, Mailing Address and ZIP Code Staples 589 Elm St. Manchester, N.H. 03101	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/96 7/23/96 7/24/96	16.84 76.72 29.72
G. Full Name, Mailing Address and ZIP Code Staples 589 Elm St. Manchester, N.H. 03101	office supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/25/96 8/10/96 8/16/96	78.65 49.04 33.28
H. Full Name, Mailing Address and ZIP Code U.S. Postal Service 1000 Elm St. Manchester, N.H. 03101	Mail/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/96 7/22/96 7/22/96	32.00 156.74 64.00
I. Full Name, Mailing Address and ZIP Code Mail Boxes, Etc. 816 Elm St. Manchester, N.H. 03101	copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/96 8/18/96 7/29/96	14.02 14.02 3.80

SUBTOTAL of Disbursements This Page (optional)

19,355.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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PAGE **5** OF **6**
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NAME OF COMMITTEE (in Full)

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Laver, Halley Victoria, Inc. 2201 Street N.E., Suite 290 Washington, D.C. 20002	polling Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/8/96	12,750.00
B. Full Name, Mailing Address and ZIP Code U.S. Postal Service 1000 Elm St. Manchester, N.H. 03101	Mail/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/24/96 7/26/96 8/5/96	136.60 130.75 11.12
C. Full Name, Mailing Address and ZIP Code U.S. Postal Service 1000 Elm St. Manchester, N.H. 03101	Mail/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/27/96 7/30/96 8/7/96	100.00 89.18 27.25
D. Full Name, Mailing Address and ZIP Code U.S. Postal Service 1000 Elm St. Manchester, N.H. 03101	Mail/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/8/96 8/9/96 8/16/96	115.35 42.47 128.00
E. Full Name, Mailing Address and ZIP Code Radio Shack 847 Hanover St. Manchester, N.H. 03104	batteries Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/29/96	9.17
F. Full Name, Mailing Address and ZIP Code Copy Express 931 Elm St. Manchester, N.H. 03101	enlargement/copy Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/15/96	15.00
G. Full Name, Mailing Address and ZIP Code Mail Boxes Etc. 816 Elm St. Manchester, N.H. 03101	copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	12.25
H. Full Name, Mailing Address and ZIP Code Shop 'n Save Hanover St. Manchester, N.H. 03104	food Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/96	35.46
I. Full Name, Mailing Address and ZIP Code U.S. Postal Service 1000 Elm St. Manchester, N.H. 03104	Mail/Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96 8/8/96	3.00 15.00

SUBTOTAL of Disbursements This Page (optional)

13,620.60

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Keefe For Congress 1996

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kinko's Copies 3 Colby Ct. Bedford, N.H. 03110	paper Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/13/96	30.50
B. Full Name, Mailing Address and ZIP Code NCEC (contributor) 10 East 39th Street New York, New York 10016	electoral targeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/17/96	2,500.00 (IN KIND RECEIVED)
C. Full Name, Mailing Address and ZIP Code Bruce May (contributor) 9 Harding Ave Rochester, N.H.	food-reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/20/96	75.00 (IN KIND)
D. Full Name, Mailing Address and ZIP Code Dan Reidy (contributor) 44 High St. Cofftown, N.H.	food-reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/8/96	50.00 (IN KIND)
E. Full Name, Mailing Address and ZIP Code Cardyn Mebert 254 Dover Point Rd. Dover, N.H.	food-reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/96	100.00 (IN KIND)
F. Full Name, Mailing Address and ZIP Code Gaetan Digangi 2 Shore St. Merrimack, N.H.	food-reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/5/96	50.00 (IN KIND)
G. Full Name, Mailing Address and ZIP Code Bobby Fisher 23 Hillcrest Dr. Dover, N.H.	food-reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	8/21/96	100.00 (IN KIND)
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

2,905.50

TOTAL This Period (last page this line number only)

74,854.33

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER
11(A)(i)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

MAY GRUBER
40 FIFTH AVE.
NEW YORK, NEW YORK 10011

Name of Employer

retired

Date (month,
day, year)

7/1/96
8/1/96

Amount of Each
Receipt this Period

\$200.00
\$150.00

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

Aggregate Year-to-Date > \$ 350

B. Full Name, Mailing Address and ZIP Code

MARGUERITE ROSE MURPHY
7 GAGE RD.
GEORGETOWN, NH 03110-5616

Name of Employer

Occupation

Date (month,
day, year)

7/1/96

Amount of Each
Receipt this Period

\$100.00

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

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Occupation

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code VINCENT WENNERS, JR. 535 NORTH ADAMS ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Craig, Wenners, Craig Casinighino Occupation ATTORNEY Aggregate Year-to-Date > \$ 250	Date (month, day, year) 7/10/96	Amount of Each Receipt this Period \$ 250.00
B. Full Name, Mailing Address and ZIP Code RICHARD J. JUMAL 63 HIGH STREET MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation ATTORNEY Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/17/96	Amount of Each Receipt this Period \$ 100.00
C. Full Name, Mailing Address and ZIP Code MATTHIAS J. REYNOLDS 195 HEATHER MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 150	Date (month, day, year) 7/17/96	Amount of Each Receipt this Period \$ 150.00
D. Full Name, Mailing Address and ZIP Code JOSEPH F. McDowell III 282 N. RIVER RD. MANCHESTER, NH 03105-3280 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer McDowell + McKee Occupation attorney Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 7/16/96	Amount of Each Receipt this Period \$ 1,000.00
E. Full Name, Mailing Address and ZIP Code FRED DESMARIS 260 STEWART DRIVE MANCHESTER, NH 03104-1833 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Wiggin + Nourie Occupation attorney Aggregate Year-to-Date > \$ 500	Date (month, day, year) 7/16/96	Amount of Each Receipt this Period \$ 500.00
F. Full Name, Mailing Address and ZIP Code ED STEWART 205 N. BEND DR. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hall, Hess, Kenison, Morphy Stewart + Keefe Occupation attorney Aggregate Year-to-Date > \$ 250	Date (month, day, year) 7/17/96	Amount of Each Receipt this Period \$ 250.00
G. Full Name, Mailing Address and ZIP Code Philip F. Curtin 970 RAY ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Law Offices of Philip Curtin Occupation attorney Aggregate Year-to-Date > \$ 250	Date (month, day, year) 7/16/96	Amount of Each Receipt this Period \$ 250.00

SUBTOTAL of Receipts This Page (optional)

\$ 2,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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for each category of the
Detailed Summary PagePAGE 3 OF 37
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

LANNY S. DAVIS
2550 M. ST. N.W.
WASHINGTON, D.C. 20037

Name of Employer

Date (month,
day, year)

7/8/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

FINIS E. WILLIAMS III
15 N. MAIN ST. SUITE 206
CONCORD, NH 03301

Name of Employer

Date (month,
day, year)

7/3/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

MICHAEL R. MYSSEY
42 HILLCREST RD.
COFFSTOWN, NH 03045

Name of Employer

Date (month,
day, year)

7/3/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

D. Full Name, Mailing Address and ZIP Code

PETER F. GOLABIEWSKI
230 HOLT ST.
MANCHESTER, NH 03103

Name of Employer

Date (month,
day, year)

7/11/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

E. Full Name, Mailing Address and ZIP Code

MICHAEL OUGAN
1309 OAKCREST DR.
ALEXANDRIA, VA 22302

Name of Employer

Date (month,
day, year)

7/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

F. Full Name, Mailing Address and ZIP Code

ROY A. DUDDY
360 RT. 101
BEAUFORT, NH 03110

Name of Employer

Date (month,
day, year)

7/16/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

G. Full Name, Mailing Address and ZIP Code

CHRISTOPHER KEENE
28 SANDERSON AVE.
GREENLAND, NH 03840

Name of Employer

Date (month,
day, year)

7/13/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

95-01-620-1250

SCHEDULE A

IND.

ITEMIZED RECEIPTS

Use separate schedule(s)
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

NICH BUNYARD
300 River Rd.
Manchester, NH 03104

Name of Employer

Date (month,
day, year)

7/1/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 105

B. Full Name, Mailing Address and ZIP Code

AGNES BUNYARD
300 River Rd.
Manchester, NH 03104

Name of Employer

Date (month,
day, year)

7/1/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

KENT BARNER
40 EAST PEARL ST., SUITE 201
NASHUA, NH 03060-3408

Name of Employer

Date (month,
day, year)

7/16/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

D. Full Name, Mailing Address and ZIP Code

COREY BELOBROW
24 WESTBOURNE RD.
CONCORD, NH 03301

Name of Employer

Date (month,
day, year)

7/17/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

E. Full Name, Mailing Address and ZIP Code

ELEANOR C. CARMY
P.O. Box 6
LYME, NH 03768

Name of Employer

Date (month,
day, year)

7/13/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

F. Full Name, Mailing Address and ZIP Code

RAYMOND BUCKLEY, II
161 FAIR LAKE
MANCHESTER, NH 03103

Name of Employer

Date (month,
day, year)

7/16/96

Amount of Each
Receipt this Period

\$10.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 10

G. Full Name, Mailing Address and ZIP Code

MARITA GORDON
603 STRAW HILL
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

7/17/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

SUBTOTAL of Receipts This Page (optional)

\$460.00

TOTAL This Period (last page this line number only)

SCHEDULE A

IND

ITEMIZED RECEIPTS

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7/19/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 5 OF 37
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

MICHAEL JOSEPH
56-G ROBERT CURT
MANCHESTER, NH 03103

Name of Employer

Date (month,
day, year)

7/6/96

Amount of Each
Receipt this Period

\$125.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$25

B. Full Name, Mailing Address and ZIP Code

CAROL M. BENJULIE
12 SILVER ST.
HAMPTON, NH 03842

Name of Employer

Date (month,
day, year)

7/14/96

Amount of Each
Receipt this Period

\$125.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$25

C. Full Name, Mailing Address and ZIP Code

WESLEY STINSON
15 NEW CASTLE ST.
CONCORD, NH 03301

Name of Employer

Date (month,
day, year)

7/6/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$50

D. Full Name, Mailing Address and ZIP Code

PETER S. LOUGHLIN
336 THAXTER RUN
PORTSMOUTH NH 03801

Name of Employer

Date (month,
day, year)

7/11/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$50

E. Full Name, Mailing Address and ZIP Code

VICTOR M. HUMIN
40 HARRIMAN LANE
WARREN, NH 03278

Name of Employer

Date (month,
day, year)

7/13/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$50

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

\$

SUBTOTAL of Receipts This Page (optional)

\$200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

320.
7/10/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 6 OF 37
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

STEVEN MARTIN SCOTT
17020 Brookwood Dr.
Boca Raton, FL 33496

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

Name of Employer

Coastal Physician
Group

Occupation

Physician

Date (month,
day, year)

7/2/96

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

STEVEN ROBERT SCOTT
17020 Brookwood Dr.
Boca Raton, FL 33496

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

Name of Employer

n/a

Occupation

Student

Date (month,
day, year)

7/2/96

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 4,000

C. Full Name, Mailing Address and ZIP Code

REBECCA SCOTT
17020 Brookwood Dr.
Boca Raton, FL 33496

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

Name of Employer

n/a

Occupation

homemaker

Date (month,
day, year)

7/2/96

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1,000

D. Full Name, Mailing Address and ZIP Code

ELIZABETH C. JANEWAY
225 Tyler Rd
Webster, NH 03303

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

Name of Employer

self

Occupation

writer

Date (month,
day, year)

7/2/96

Amount of Each
Receipt this Period

\$1,000.00

Aggregate Year-to-Date > \$ 1,000

E. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt this Period

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt this Period

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Name of Employer

Occupation

Date (month,
day, year)Amount of Each
Receipt this Period

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$4,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code
CAROLYN BENTHLEN
1015 SHIRLEY AVE.
Goffstown, NH 03045

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 150

B. Full Name, Mailing Address and ZIP Code
ELIND SCOT McGWAGUE
RFD 8 50 N. AMHERST RD.
BEFORD, NH 03110-5404

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 200

C. Full Name, Mailing Address and ZIP Code
MASSUNE SMITH
Box 136
DURHAM, NH 03824

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 200

D. Full Name, Mailing Address and ZIP Code
ABIGAIL ROGERS
4.5 STATE ST.
CONCORD NH 03301

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

E. Full Name, Mailing Address and ZIP Code
SANE PALMER
P.O. Box 345
NORTH HAMPTON NH 03862

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

F. Full Name, Mailing Address and ZIP Code
PATRICIA KEEGAN
13 SEED STREET
SALEM, NH 03079

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

G. Full Name, Mailing Address and ZIP Code
WENDY DUCHARME
183 SUTHER RD.
CAMDEN, NH 03034

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this PeriodReceipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

SUBTOTAL of Receipts This Page (optional)

\$750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SWD.
7/10/96

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

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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

<p>A. Full Name, Mailing Address and ZIP Code ELIZABETH TOWLE - has been requested -</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 30</p>	<p>Date (month, day, year) 7/1/96</p>	<p>Amount of Each Receipt this Period \$ 30.00</p>
<p>B. Full Name, Mailing Address and ZIP Code RUTH KESSIN 10 DOWNING ST. LACONIA NH 03246</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 25</p>	<p>Date (month, day, year) 7/1/96</p>	<p>Amount of Each Receipt this Period \$ 25.00</p>
<p>C. Full Name, Mailing Address and ZIP Code DOROTHY MING 4 KINGSFORD ROAD HANOVER, NH 03755</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 25</p>	<p>Date (month, day, year) 7/1/96</p>	<p>Amount of Each Receipt this Period \$ 25.00</p>
<p>D. Full Name, Mailing Address and ZIP Code JOSEPH E. MITCHELL 15 PARKHURST RD. MERRIMACK, NH 03054</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 25</p>	<p>Date (month, day, year) 7/8/96</p>	<p>Amount of Each Receipt this Period \$ 25.00</p>
<p>E. Full Name, Mailing Address and ZIP Code GERALDINE ROGERS 552 WASHINGTON RD. RYE, NH 03870</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 10</p>	<p>Date (month, day, year) 7/3/96</p>	<p>Amount of Each Receipt this Period \$ 10.00</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

SUBTOTAL of Receipts This Page (optional)

\$ 115.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code RALPH HOLMES 75 SAUNDERS HILL RD. NEW BOSTON, NH 03070 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/3/96	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code NANCY RICHMOND - STONE 2 SHORE DRIVE MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer SELF Occupation Attorney Aggregate Year-to-Date > \$ 200	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code MICHAEL W. BANNAN 59 MIDOLESEX RD. MERRIMACK, NH 03054-0775 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 20	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$20.00
D. Full Name, Mailing Address and ZIP Code BENITA R. KNIGHT 17 OAKH RD. MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code ERIC HANE 7 HOLLY CT. EXETER, NH 03833 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/2/96	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and ZIP Code ADAM GOLDBERG 2745 24TH ST. N.W. NO 410 WASHINGTON, VA 20008 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 7/29/96	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code DAVID T. MEIKLE 233 WASHINGTON ST. DORSET NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 7/30/96	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$445.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

520
8/8/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 20 OF 37
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code MARK MALLOTT P.O. BOX 158 SAWTOOTH RD. GILMANTON NH 03237 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$1100.00
B. Full Name, Mailing Address and ZIP Code EDMUND J. BOUTIN P.O. BOX 1107 RT. 102 ONE B. HICK RD. LONDONDERRY, NH 03053 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Boutin Solomon Occupation ATTORNEY Aggregate Year-to-Date > \$ 200	Date (month, day, year) 8/6/96	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and ZIP Code TERRI C. BEYER 30 SEA RD. PO BOX 6 RYE BEACH, NH 03871 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code ALAN D. ROSE, JR. 50 BRISTOL RD. WELLESLEY, MA 02181 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code K. JOHN ASTILL 23 MITCHELL ST. MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$10.00
F. Full Name, Mailing Address and ZIP Code NANCY RYAN 5 HAINES TERRACE MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 15	Date (month, day, year) 8/6/96	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and ZIP Code LYANNE SCHMIDT 17 VING HENRY CT. MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 10	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$10.00

SUBTOTAL of Receipts This Page (optional)

\$535.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SND
8/13/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 11 OF 37
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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

LESLIE C. NIXON
78 RIDGEVIEW LN.
NEW BOSTON, NH 03070

Name of Employer

Date (month,
day, year)

7/31/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):Occupation
ATTORNEY

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

SELMA R. DEITCH, M.D.
300 NORTH ADAMS ST.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

7/30/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

PETER FLOOD

Parkhurst Rd
Merrimack, NH 03054

Name of Employer

Date (month,
day, year)

8/6/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

D. Full Name, Mailing Address and ZIP Code

ROSE ARTHUR
25 ISLAND OR.
MERRIMACK, NH 03054

Name of Employer

Date (month,
day, year)

8/6/96

Amount of Each
Receipt this Period

\$5.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 5

E. Full Name, Mailing Address and ZIP Code

JUE MERTON

- Has been requested -

Name of Employer

Date (month,
day, year)

8/6/96

Amount of Each
Receipt this Period

\$10.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 10

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Aggregate Year-to-Date > \$

Receipt For:

☐ Primary☐ General☐ Other (specify):

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Aggregate Year-to-Date > \$

Receipt For:

☐ Primary☐ General☐ Other (specify):

SUBTOTAL of Receipts This Page (optional)

\$315.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code ELEANOR A. PORTER 1054 CHESTNUT ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/11/96	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code ANNE ZACHOS 2093 ELM ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/12/96	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code LAWRENCE CUNNELL 100 FORD RD. SOUTH PORTLAND, ME 04106 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Atlantic Bank Occupation President Aggregate Year-to-Date > \$ 1000	Date (month, day, year) 8/8/96	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and ZIP Code GREGORY MARTIN 22 VALLEY ST. KEENE, NH 03431 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/6/96	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and ZIP Code HAMILTON KRANS. 24 MAIN ST. DORR, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/7/96	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and ZIP Code JOHN A. PORTER 46 S. MAIN ST. GRAFTON, NH 03045 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/9/96	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and ZIP Code MARK SEVERANCE 713 WILLISTON, VT. WILLISTON, VT. 05445 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/7/96	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$ 1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/14/96Use separate schedule(s)
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Detailed Summary PagePAGE 13 OF 37
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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code CAROL F. MOORE 38110 S. SPRING ST. CONCORD, NH 03301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/8/96	Amount of Each Receipt this Period \$150.00
B. Full Name, Mailing Address and ZIP Code STEPHEN CORIN 4 ABBY OR CHATELAIN, NH 03224 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/12/96	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code PAUL CHMUT 5 BRICKYARD DR. LITCHFIELD, NH 03051 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/12/96	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code DANIEL O'SHAUGHNESSY 150 MYRTLE ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 125	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$125.00
E. Full Name, Mailing Address and ZIP Code Debbie WEISBERG 137 ORR HILL ST. NEWTON CENTER, MA 02154 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self Occupation retail consultant Aggregate Year-to-Date > \$ 500	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code JANET CATALDO 126 HIGH RIDGE ROAD MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer retired Occupation Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 8/13/96	Amount of Each Receipt this Period \$750.00
G. Full Name, Mailing Address and ZIP Code JOSEPH CATALDO 126 HIGH RIDGE ROAD MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Meredith Medical Center Occupation doctor Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$2575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/14/96Use separate schedule(s)
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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code PAUL MAGGIOTTO 58 PLEASANT ST. CONCORD, NH 03301	Name of Employer Occupation	Date (month, day, year) 8/8/96	Amount of Each Receipt this Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100		
B. Full Name, Mailing Address and ZIP Code PETER S. GOLD 5 BEVERLY PARK BEVERLY HILLS, CA 90210	Name of Employer self-employed Occupation businessman	Date (month, day, year) 7/11/96	Amount of Each Receipt this Period \$1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1,000		
C. Full Name, Mailing Address and ZIP Code NATHAN KAHN 1 Parker Plaza Fort Lee, NJ 07024	Name of Employer Empire Resources Occupation Distributor	Date (month, day, year) 7/29/96	Amount of Each Receipt this Period \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
D. Full Name, Mailing Address and ZIP Code BOA FREIDMAN P.O. BOX 3051 BOCA RATON, FL 33431-3051	Name of Employer retired Occupation	Date (month, day, year) 8/2/96	Amount of Each Receipt this Period \$2000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
E. Full Name, Mailing Address and ZIP Code SHAWN A. FREIDMAN P.O. BOX 3051 BOCA RATON, FL 33434	Name of Employer Friedman Industries Occupation Vice President	Date (month, day, year) 8/2/96	Amount of Each Receipt this Period \$2000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
F. Full Name, Mailing Address and ZIP Code ROBERT RUBIN 1 Greenwich PLZ. Greenwich, CT. 06830	Name of Employer US Gov't Occupation Secretary of the Treasury	Date (month, day, year) 8/1/96	Amount of Each Receipt this Period \$2,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,000		
G. Full Name, Mailing Address and ZIP Code MARY OULAN 487 ORCH ST. MANCHESTER, NH 03104	Name of Employer Occupation	Date (month, day, year) 8/5/96	Amount of Each Receipt this Period \$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 100		

SUBTOTAL of Receipts This Page (optional)

\$ 9200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/14/96

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

KEEFE FOR CONGRESS 1996

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Thimi Mina 16 Windsor Pines Dr. Scarsborough, ME 04874</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p> <p>7/30/96</p>	<p>Amount of Each Receipt this Period</p> <p>\$100.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>ED ROMERO 1501 ENGLE RIDGE RD. NE ALBUQUERQUE, NM 87122</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Advanced Sciences Incorporated</p> <p>Occupation</p> <p>CEO</p>	<p>Date (month, day, year)</p> <p>7/30/96</p>	<p>Amount of Each Receipt this Period</p> <p>\$500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>MR. SAMUEL HARMON 43 KITTLE CREEK ROAD WESTON, CT. 06883</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Schroeder Wertheim</p> <p>Occupation</p> <p>Chairman</p>	<p>Date (month, day, year)</p> <p>8/2/96</p>	<p>Amount of Each Receipt this Period</p> <p>\$2000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>STEVEN SHULMAN LIBERTY LN. HAMPSHIRE, NH 03842</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Fisher Scientific</p> <p>Occupation</p> <p>executive</p>	<p>Date (month, day, year)</p> <p>8/8/96</p>	<p>Amount of Each Receipt this Period</p> <p>\$1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Name of Employer</p> <p>Occupation</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>Aggregate Year-to-Date > \$</p>	<p>Aggregate Year-to-Date > \$</p>	<p>Aggregate Year-to-Date > \$</p>	<p>Aggregate Year-to-Date > \$</p>

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$3600.00

SCHEDULE A

ITEMIZED RECEIPTS

JNO
7/26/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 26 OF 37
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NAME OF COMMITTEE (In Full)

KEEFE FOR Congress 1996

A. Full Name, Mailing Address and ZIP Code

Richard Siewert
430 S. Capitol St. SE
Washington, DC 20003

Name of Employer

Democratic
National
CommitteeDate (month,
day, year)

7/15/96

Amount of Each
Receipt this Period

\$250.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Deputy executive director

Aggregate Year-to-Date

> \$ 250

B. Full Name, Mailing Address and ZIP Code

SAH FOLEY
152 Clinton St.
Portsmouth, NH 03801

Name of Employer

Date (month,
day, year)

7/21/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 150

C. Full Name, Mailing Address and ZIP Code

RAYMOND P. BLANCHARD
95 COURT ST.
PORTSMOUTH, NH 03801

Name of Employer

Date (month,
day, year)

7/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 100

D. Full Name, Mailing Address and ZIP Code

BRUCE FELMLY
70 TRENTON ST.
MUNICIPALITY, NH 03104

Name of Employer

Date (month,
day, year)

7/16/96

Amount of Each
Receipt this Period

\$25.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 25

E. Full Name, Mailing Address and ZIP Code

EVELYN DUBROW
815 16th St., Suite 401
Washington DC 20006

Name of Employer

United Needle, Textile
EmployeesDate (month,
day, year)

7/14/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

VP

Aggregate Year-to-Date

> \$ 500

F. Full Name, Mailing Address and ZIP Code

WILLIAM SATURLE
216 N. MAIN ST.
CONCORD, NH 03301

Name of Employer

Date (month,
day, year)

7/24/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

SUBTOTAL of Receipts This Page (optional)

\$1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SND
8/2/96

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

KEEFE FOR CONGRESS - 1996

A. Full Name, Mailing Address and ZIP Code

STEPHEN FORD
FRIEDMAN DR.
24E BENCH, NIT 03871

Name of Employer

Foss Manufacturing

Date (month,
day, year)

7/23/96

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Occupation

CEO

Aggregate Year-to-Date

> \$ 1,000

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/2/96Use separate schedule(s)
for each category of the
Detailed Summary Page

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FOR LINE NUMBER
(11A)

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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code PHILIP ROBERTS 12 Hoyt Rd. Merrimack, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/28/96	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code EDWARD DUNSMORE 533 WALSH RD. RIVINGTON, NH 03580 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Village Book Store Occupation retail executive Aggregate Year-to-Date > \$ 250	Date (month, day, year) 7/25/96	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code BRUCE M. M. 9 HAWKING AVENUE CONIC, NH 03839 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/20/96	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code GREGORY D. ROBBINS 538 A MIDDLERD. OGDEN, NH 03820-4433 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/23/96	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code JOHN A. WOLKOWSKI 12 WYATTSIDE DR. BEDFORD, NH 03110-6468 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/23/96	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code JAMES W. CANTIG 84 BRY ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/24/96	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code JOHN C. McSWINE PEARL LAKE RD. SUGAR HILL RD. 03585 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 7/23/96	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/2/96Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

RONALD E. COOK
315 Southwest Rd.
CANTERBURY, NH 03224

Name of Employer

Date (month,
day, year)

7/23/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

MMU E. JENNER
P.O. BOX 10396
BEFORE, NH 03110

Name of Employer

Date (month,
day, year)

7/18/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

SCOTT S. WILKINSON
116 BRANCH RD.
WENE, NH 03281

Name of Employer

Date (month,
day, year)

7/29/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

D. Full Name, Mailing Address and ZIP Code

JOHN P. RESCH
274 N. BAY ST.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

7/13/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

E. Full Name, Mailing Address and ZIP Code

WENDY GREENEY
158 LIBERTY HILL RD.
BEFORE, NH 03110

Name of Employer

Date (month,
day, year)

7/20/96

Amount of Each
Receipt this Period

\$25.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 25

F. Full Name, Mailing Address and ZIP Code

JEFFREY GORDON
P.O. BOX 4346
PORTSMOUTH, NH 03802

Name of Employer

Date (month,
day, year)

7/24/96

Amount of Each
Receipt this Period

\$125.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 125

G. Full Name, Mailing Address and ZIP Code

PAULA KEEFE
P.O. BOX 599
WILTON, NH 03086

Name of Employer

Date (month,
day, year)

7/21/96

Amount of Each
Receipt this Period

\$250.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 250

SUBTOTAL of Receipts This Page (optional)

\$750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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11(n)(1)

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code ROBERT SHAW 111 WEBSTER ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code PETER KINIG 9 PEPPERIDGE DR. MANCHESTER, NH 03103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation <i>retired</i> Aggregate Year-to-Date > \$ 500	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code THOMAS KINIG 2101 GOTT'S FALL RD. MANCHESTER, NH 03103 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code JON M. GROSS 429 MURFORD ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code ROBERT LAGO 344 WHITFORD STREET MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/13/96	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code ANNE T. WALSH 5 RUTH ST. PORTSMOUTH, NH 03801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code WILLIAM SILVESTRI 7000 VILLAGE RD. SALEM, NH 03079 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Builder Aggregate Year-to-Date > \$ 250	Date (month, day, year) 8/13/96	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 4 (2)(1)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

Sheila Brisson
18 ASBURN RD.
ROCKFORD, NH 03106

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

8/15/96

\$100.00

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/20/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 22 OF 37
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

VIRGINIA DOHERTY
50 MARSTON STREET
MANCHESTER, NH 03102

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

MICHAEL DUNFEY
28 WHITNEY AVE
MANCHESTER, NH 03104-1568

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

C. Full Name, Mailing Address and ZIP Code

JOHN MCWALLY
110 N. BEND DR.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

D. Full Name, Mailing Address and ZIP Code

PETER HUE BOLLING
R2 3 BOX 194
CORNISH, NH 03745

Name of Employer

Date (month,
day, year)

8/14/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☐ Primary☒ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1,500

E. Full Name, Mailing Address and ZIP Code

JUDITH PAQUETTE,
16 FAUVENOT CIRCLE
HELDEN, NH 03106

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

F. Full Name, Mailing Address and ZIP Code

MARIL BOOI
35 THAYER ST.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 350

G. Full Name, Mailing Address and ZIP Code

JEROME DUNN
69 GILFORD ST.
MANCHESTER, NH 03102-5160

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 100

SUBTOTAL of Receipts This Page (optional)

\$1050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

520
8/20/96

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

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

<p>A. Full Name, Mailing Address and ZIP Code WILLIAM S. ORLUT P.O. BOX 808 MANCHESTER, NH 03105</p>	<p>Name of Employer Wiggin + Nourie Occupation attorney</p>	<p>Date (month, day, year) 8/15/96</p>	<p>Amount of Each Receipt this Period \$ 250.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 250</p>		
<p>B. Full Name, Mailing Address and ZIP Code JAMES FREIBURG 1475 BELMONT ST. MANCHESTER, NH 03104</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 8/8/96</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 100</p>		
<p>C. Full Name, Mailing Address and ZIP Code PATRICK OFFER P.O. BOX 390 MANCHESTER, NH 03105</p>	<p>Name of Employer Occupation retired</p>	<p>Date (month, day, year) 8/5/96</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 350</p>		
<p>D. Full Name, Mailing Address and ZIP Code KAREN PAGUETTE 32 FARMVIEW Circle HOOKSETT, NH 03106-2706</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 8/15/96</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 100</p>		
<p>E. Full Name, Mailing Address and ZIP Code THOMAS BISSETT 1408 UNION ST. MANCHESTER, NH 03104</p>	<p>Name of Employer Occupation DOCTOR</p>	<p>Date (month, day, year) 8/15/96</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 100</p>		
<p>F. Full Name, Mailing Address and ZIP Code PAUL HARRISON 180 SHAW ST. MANCHESTER, NH 03104</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 8/15/96</p>	<p>Amount of Each Receipt this Period \$ 100.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 100</p>		
<p>G. Full Name, Mailing Address and ZIP Code MARY McDONNELL 155 WELLESLEY ST. MANCHESTER, NH 03104</p>	<p>Name of Employer Occupation</p>	<p>Date (month, day, year) 8/14/96</p>	<p>Amount of Each Receipt this Period \$ 150.00</p>
<p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Aggregate Year-to-Date > \$ 150</p>		

SUBTOTAL of Receipts This Page (optional)

\$ 900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SWD
8/20/96

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

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

Alvin Lohr
41 Brook St
Manchester, NH 03104

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

Name of Employer

self

Occupation

attorney

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/14/96

Amount of Each Receipt this Period

\$100.00

B. Full Name, Mailing Address and ZIP Code

Mary Hussey
200 Haverhill St.
Manchester, NH 03104

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 150

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

C. Full Name, Mailing Address and ZIP Code

Viola Pearson
774 Summer St.
Manchester, NH 03103

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

D. Full Name, Mailing Address and ZIP Code

Richard Aherne
141 North St.
Manchester, NH 03104

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

E. Full Name, Mailing Address and ZIP Code

James McDonough
20 E. Auburn Rd.
Hooksett, NH 03106

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

F. Full Name, Mailing Address and ZIP Code

Daniel Buttsford
18 Regency Drive
Beoford, NH 03110

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

G. Full Name, Mailing Address and ZIP Code

Madeleine F. Ahlgren
76 Weston St.
Manchester, NH 03104

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

Name of Employer

Occupation

Aggregate Year-to-Date > \$ 100

Date (month, day, year)

8/15/96

Amount of Each Receipt this Period

\$100.00

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Inv.
8/20/96

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

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

LAWSON CORNELL
80 VALANTINE DRIVE
MANCHESTER, NH 03103.

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/10/96

\$100.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 100

B. Full Name, Mailing Address and ZIP Code

EDWARDS R. HARRISON
181 GROVE ST.
LITTLETON, NH 03832

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/15/96

\$125.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 25

C. Full Name, Mailing Address and ZIP Code

DAWN DUBE
250 WHITEHALL RD.
HOOKSETT, NH 03106

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/15/96

\$125.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 25

D. Full Name, Mailing Address and ZIP Code

GEORGE BRUNO
161 N. ADAMS ST.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/15/96

\$100.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 100

E. Full Name, Mailing Address and ZIP Code

PATRICIA CORNELL
787 MONTGOMERY ST.
MANCHESTER, NH 03102

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/15/96

\$100.00

Occupation

Teacher

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 300

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

8/20/96
JNDUse separate schedule(s)
for each category of the
Detailed Summary PagePAGE 26 OF 37
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

CHRISTOPHER C. PHILLIPS
11420 ENCORE DR.
SILVER SPRING, MD 20901

Name of Employer

Date (month,
day, year)

8/17/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 100

B. Full Name, Mailing Address and ZIP Code

PRISCILLA R. PHENIX
15 Edgewood Rd
Durham, NH 03824

Name of Employer

Date (month,
day, year)

8/16/96

Amount of Each
Receipt this Period

\$10.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 10

C. Full Name, Mailing Address and ZIP Code

BETH MATTEOLI
4 GUINEA RD.
STRATHAM, NH 03885

Name of Employer

Date (month,
day, year)

8/6/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 50

D. Full Name, Mailing Address and ZIP Code

MILEVA D. LOO
13 HUNTER DRIVE
BOW, NH 03304

Name of Employer

Date (month,
day, year)

7/19/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 50

E. Full Name, Mailing Address and ZIP Code

LAJANE WATSON
809 STATE STREET
PORTSMOUTH, NH 03801

Name of Employer

Date (month,
day, year)

8/10/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 50

F. Full Name, Mailing Address and ZIP Code

GEORGE KRASNER
77 LARCHMONT ROAD
MANCHESTER, NH 03104-3935

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 50

G. Full Name, Mailing Address and ZIP Code

DEBORAH GRANT
2200 ELM STREET
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

8/13/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 50

SUBTOTAL of Receipts This Page (optional)

\$360.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11 (a)(1)

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code JOHN F. MC GOWN 2510 ELM ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code DORIS DAKOULAS 226 LAKE SHORE RD. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code WILLIAM J. WILEY 28 SANDWICH CONCORD, NH 03301 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code JOHN O'CONNELL 555 N. ADAMS ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code JOSEPH E. MITCHELL 15 PARKHURST RD. MERRIMACK, NH 03054 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 125	Date (month, day, year) 8/15/96	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code NEIL GARNEY 55 OAKWOOD DR. PORTSMOUTH, NH 03801 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 100	Date (month, day, year) 8/13/96	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SND
8/20/96Use separate schedule(s)
for each category of the
Detailed Summary Page

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11 (911)

33

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

MARILYN BUSTO

-has been requested-

Name of Employer

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$100.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 100

B. Full Name, Mailing Address and ZIP Code

ALBERT J. DWOSKIN
3050 Chainbridge Rd. Suite 200
Fairfax, VA 22030

Name of Employer

AJ Dwoskin +
AssociatesDate (month,
day, year)

8/7/96

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

CED

Aggregate Year-to-Date

> \$ 1,000

C. Full Name, Mailing Address and ZIP Code

DEBORAH BUTLER
52 RIDGE RD.
CONCORD, NH 03301

Name of Employer

State of NH

Date (month,
day, year)

8/15/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☐ Primary☒ General☐ Other (specify):

Occupation

CPA

Aggregate Year-to-Date

> \$ 1,500

D. Full Name, Mailing Address and ZIP Code

MARTIN L. GROSS
15 RUMFORD ST.
CONCORD, NH 03301

Name of Employer

Solloway + Hollis

Date (month,
day, year)

8/13/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

attorney

Aggregate Year-to-Date

> \$ 1,000

E. Full Name, Mailing Address and ZIP Code

JAMES M. DEMERS
3208 COLE AVE.
DALLAS, TX 75204

Name of Employer

Date (month,
day, year)

8/13/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 150

F. Full Name, Mailing Address and ZIP Code

CHARLES SHERIDAN
9 FISHILL FARM
CONCORD, NH 03301

Name of Employer

Date (month,
day, year)

8/14/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 150

G. Full Name, Mailing Address and ZIP Code

JENNIFER S. GREEN
300 N. RIVER RD. APT 401
MIDDLEBURY, NH 03104

Name of Employer

Date (month,
day, year)

8/13/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 150

SUBTOTAL of Receipts This Page (optional)

\$2550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 29 OF 37

FOR LINE NUMBER 11 (a)(1)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

 ENDICOTT PEARSON
BOX 1078
HOLLIS, NH 03049

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 500

Date (month, day, year)

Amount of Each Receipt this Period

B. Full Name, Mailing Address and ZIP Code

 JAMES P. MINAHAN
HC 65 BOX 2
BRADFORD, NH 03221

Name of Employer

 The Dupont
Group

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Public Affairs Consultant

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 250

C. Full Name, Mailing Address and ZIP Code

 STEVEN R. MAVERICK
P.O. BOX 4165
CONCORD, NH 03302

Name of Employer

 US Trade + Development
Agency

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Special Asst for Public Affairs

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 250

D. Full Name, Mailing Address and ZIP Code

 MICHAEL GELMAN
11 W. LENOX STREET
CHEVY CHASE, MARYLAND 20815

Name of Employer

 Gelman, Rosenberg +
Freeman

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Managing Partner

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 500

E. Full Name, Mailing Address and ZIP Code

 RAWSON L. WOOD
P.O. BOX 502
CENTERS HARBOR, NH 03226

Name of Employer

retired

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code

 KENNETH M. JARIN
123 SOUTH BROAD STREET
PHILADELPHIA, PA 19109

Name of Employer

 MONTGOMERY, McCARTHY
WALKER & RHODES

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

ATTORNEY

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 1,000

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$2750

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

SNO
8/23/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 36 OF 37
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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

DAVID WOLOWITZ
58 MANNING STREET
PORTSMOUTH, NH 03801

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 25

8/14/96

\$25.00

B. Full Name, Mailing Address and ZIP Code

BARTRAM C. BLANCH
55 STEBBINS POND ROAD
BEDFORD, NH 03110-6629

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

8/13/96

\$50.00

C. Full Name, Mailing Address and ZIP Code

MICHAEL A. JOSEPH
55 G. ROBERT COURT
MUNICIPALITY, NH 03103.

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 25

8/17/96

\$25.00

D. Full Name, Mailing Address and ZIP Code

DR. CHRIS KEHNS
P.O. BOX 545
MUNICIPALITY, NH 03105-0545

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

8/15/96

\$50.00

E. Full Name, Mailing Address and ZIP Code

JOAN HENNESSY
4 WEBSTER TERRACE
HANOVER, NH 03755-1708

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500

8/18/96

\$500.00

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$650.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

 Use separate schedule(s)
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FOR LINE NUMBER 11(A)(1)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JENNIFER MOUNIHAN 5 VICTORIA STREET MANCHESTER, NH 03104		8/17/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
QUENTIN W. KEEFE 301 WHITFORD ST. MANCHESTER, NH 03104	Regency Mortgage Corporation	8/20/96	\$1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President	Aggregate Year-to-Date > \$ 1,000	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
LINDA STOUT SANDERS 93 HIGH ROAD RD. HOPKINTON, NH 03029		8/20/96	\$100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 100	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DANIO HESS 156 PINE STREET HOLLISSET, NH 03106-1323	Hall, Hess, Kenison, Murphy Stewart + Keefe	8/21/96	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date > \$ 2,000	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
ALICE B. CHAMBERLIN 227 BURNETT HILL RD. WARREN, NH 03278	International Joint Commission	8/17/96	\$1,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 500	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
SUINN SWOPE 21 LONG POND RD. CONCORD, NH 03301	Sheehan, Phinney Bass & Green	8/16/96	\$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation attorney	Aggregate Year-to-Date > \$ 2,000	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JEANNEETTE E. HOPKINS 34 PRAY ST. PORTSMOUTH, NH 03801		8/19/96	\$135.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 35	

SUBTOTAL of Receipts This Page (optional)

\$3735.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

JND
8/23/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 32 OF 37
FOR LINE NUMBER 11 (N.Y.)

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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

39

A. Full Name, Mailing Address and ZIP Code

DAVID SCHWARTZ.
24 LINDEN LN.
DURHAM, NH 03824

Name of Employer

Self

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$1000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Attorney

Aggregate Year-to-Date

> \$ 1,000

B. Full Name, Mailing Address and ZIP Code

ALAN ABRAHAM
5 STANTON CIRCLE
BOXFORD, MA 01921

Name of Employer

Granite State Economic
Development CorporationDate (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

President

Aggregate Year-to-Date

> \$ 1,000

C. Full Name, Mailing Address and ZIP Code

ELIZABETH L. LUNELLE
58 ANCIENT HWY
HAMPTON, NH 03842

Name of Employer

retired

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$ 500

D. Full Name, Mailing Address and ZIP Code

GEORGE HESTER
4 VILLANOVA LN.
ROCHESTER, NH 03867

Name of Employer

Occupation

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$25.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date

> \$ 25

E. Full Name, Mailing Address and ZIP Code

JAMES R. ST. JOHN
41 ATLANTIC AVE
NORTH HAMPTON, NH 03862

Name of Employer

Self

Date (month,
day, year)

8/19/96

Amount of Each
Receipt this Period

500.00

Receipt For:

☒ Primary☐ General☐ Other (specify):

Occupation

Auctioneer

Aggregate Year-to-Date

> \$ 500

F. Full Name, Mailing Address and ZIP Code

ROBERT DUNFEE
ONE HARBOR PLACE SUITE 225
PORTSMOUTH, NH 03801

Name of Employer

The Dunfee Group

Date (month,
day, year)

8/19/96

Amount of Each
Receipt this Period

\$1000.00

Receipt For:

☐ Primary☒ General☐ Other (specify):

Occupation

Executive

Aggregate Year-to-Date

> \$ 1,100

G. Full Name, Mailing Address and ZIP Code

Receipt For:

☐ Primary☐ General☐ Other (specify):

Occupation

Aggregate Year-to-Date

> \$

SUBTOTAL of Receipts This Page (optional)

\$4025.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

5ND
8/23/96

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

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(1)(A)(P.)

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)

KEEFE FOR Congress 1996

A. Full Name, Mailing Address and ZIP Code

MARIA SULLIVAN
50 SULLIVAN ROAD.
MANCHESTER, NH 03103

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/14/96

50.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 50

B. Full Name, Mailing Address and ZIP Code

SILVIA DUPUIS
451 Coolidge Ave
Manchester NH 03102

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/19/96

\$ 100.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 100

C. Full Name, Mailing Address and ZIP Code

MAYNARD HECHERL
44 ALWOOD DR.
BIRMINGHAM, NH 03825

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/18/96

\$ 100.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 100

D. Full Name, Mailing Address and ZIP Code

ELMER BOUZASE
171 BERNARD ST.
MANCHESTER, NH 03104

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/18/96

\$ 150.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 150

E. Full Name, Mailing Address and ZIP Code

MARLEEN DOW WERNER
115 BLANFORD PL.
BEAUFORT, NH 03110

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/15/96

\$ 200.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 200

F. Full Name, Mailing Address and ZIP Code

HOMER W. JANEWAY
RFD 1 BOX 850
WEBSTER, NH 03229

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/14/96

\$ 500.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 500

G. Full Name, Mailing Address and ZIP Code

MARY C. KEEFE
1461 F. PATRICK BLVD.
LOWELL, MA 01854

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

8/19/96

\$ 100.00

Occupation

Receipt For:

☒ Primary

☐ General

☐ Other (specify):

Aggregate Year-to-Date > \$ 100

SUBTOTAL of Receipts This Page (optional)

\$ 1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

5ND.
8/24/96

Use separate schedule(s)
for each category of the
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11 (A) (1)

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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

GARY HINDS
200 Campbell Rd.
Greenville, DE 19807

Name of Employer

Democratic Party of
Delaware

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$1,000.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

State Party Chairman

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code

DANIEL MARIN DUPONT
6622 81st ST.
CROFTON, MD. 20818

Name of Employer

ABCO ASSC.

Date (month,
day, year)

8/21/96

Amount of Each
Receipt this Period

\$500.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Public Affairs

Aggregate Year-to-Date > \$ 500

C. Full Name, Mailing Address and ZIP Code

JAMES H. GILL, III
3460 S. STAFFORD ST. B-2
ALLINGTON, VA 22208

Name of Employer

Date (month,
day, year)

8/21/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

D. Full Name, Mailing Address and ZIP Code

KEVIN MORRIS
86 GOODHUE ROAD
WINDHAM, NH 03087

Name of Employer

Date (month,
day, year)

8/22/96

Amount of Each
Receipt this Period

\$50.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

E. Full Name, Mailing Address and ZIP Code

JOHN AHLGREN
101 MARKET ST.
PORTSMOUTH, NH 03801

Name of Employer

Ahlgren + Perrault

Date (month,
day, year)

8/19/96

Amount of Each
Receipt this Period

\$200.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

attorney

Aggregate Year-to-Date > \$ 400

F. Full Name, Mailing Address and ZIP Code

JOHN WILLIAM RICHARDS
16 HUNTER RD.
OAKFIELD, NH 03037

Name of Employer

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$150.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 50

G. Full Name, Mailing Address and ZIP Code

EUNASIA POPON
Bay Road
NEW MARKET, NH 03857

Name of Employer

retired

Date (month,
day, year)

8/20/96

Amount of Each
Receipt this Period

\$250.00

Receipt For:

☒ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$ 250

SUBTOTAL of Receipts This Page (optional)

\$2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

520
8/24/96

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

KEEFE FOR CONGRESS 1996

43

<p>A. Full Name, Mailing Address and ZIP Code ELIANE KANSHER 395 LITTLE HARBOR RD. PORTSMOUTH, NH 03801-5507</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer retired</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500</p>	<p>Date (month, day, year) 8/20/96</p>	<p>Amount of Each Receipt this Period \$150.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Peter Bonas 41 Pier Seven Charlestown, MA 02129-4226</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Generation Ventures Association</p> <p>Occupation President</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 8/20/96</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code MIMI BONE 41 Pier Seven Charlestown, MA 02129-4226</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation homemaker</p> <p>Aggregate Year-to-Date > \$ 1,000</p>	<p>Date (month, day, year) 8/20/96</p>	<p>Amount of Each Receipt this Period \$500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code CHARLA BIZIO'S LARBE 225 PATRICIA LANE MANCHESTER, NH 03104</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 50</p>	<p>Date (month, day, year) 8/21/96</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>E. Full Name, Mailing Address and ZIP Code JOSEPH CASEY 9 FARVIEW AVE. DOVER, NH 03820</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 25</p>	<p>Date (month, day, year) 8/21/96</p>	<p>Amount of Each Receipt this Period \$25.00</p>
<p>F. Full Name, Mailing Address and ZIP Code CAROLE APPEL 16 STONE LUTHERS CIR. DOVER, NH 03820</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 30</p>	<p>Date (month, day, year) 8/21/96</p>	<p>Amount of Each Receipt this Period \$50.00</p>
<p>G. Full Name, Mailing Address and ZIP Code DAVID H. WATTERS 19 MAPLE ST. DOVER, NH 03820</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 50</p>	<p>Date (month, day, year) 8/21/96</p>	<p>Amount of Each Receipt this Period \$50.00</p>

SUBTOTAL of Receipts This Page (optional)

\$1325.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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11 (481)

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code JACK BUCKLEY 36 ARCH ST. Dover, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code MARY GARRIGANO 5 GOLD POST RD. Dover, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code SHARON SPICKLER 5 GOLD POST RD. Dover, NH 03820-5010 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code BROWNE M. DOMINGO 5 Birch Dr. Dover, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and ZIP Code FRITZ HABENICHT 303 CARBON ST. Portsmouth, NH 03801-3975 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and ZIP Code ROLAND BELHUMEUR 33 LEXINGTON ST. P.O. Box 313 Dover, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and ZIP Code MARY W. DEAN 283 GILLOPING HILL RD. HOOKINTON, NH 03229 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bradenick + Dean, PA Occupation attorney Aggregate Year-to-Date > \$ 1,000	Date (month, day, year) 8/20/96	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

IND.
8/21/96

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code ROBERT L. GIFFORD P.O. Box 68 Dover, NH 03820 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 50	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and ZIP Code JULIE DUNFEE 18 BROOKVIEW RD. HOPKINTON, NH 03229 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer not currently employed Occupation film maker Aggregate Year-to-Date > \$ 300	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and ZIP Code Michael Reed. 316 MYRTLE ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Stebbins Reality Occupation realtor Aggregate Year-to-Date > \$ 250	Date (month, day, year) 8/19/96	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code WILLIAM BARNON 25 CLINCH ST. MANCHESTER, NH 03104 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 25	Date (month, day, year) 8/14/96	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and ZIP Code GEOFFREY CLARK 150 MOOLE ST PORTSMOUTH, NH 03801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer self-employed Occupation physician Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code MARTHA FULLER CLARK 150 MOOLE ST. PORTSMOUTH, NH 03801 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer State of New Hampshire Occupation state rep. Aggregate Year-to-Date > \$ 2,000	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$2525.00

TOTAL This Period (last page this line number only)

57,815.00

SCHEDULE A

PAC

ITEMIZED RECEIPTS

7/19/96

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 10
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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996.

A. Full Name, Mailing Address and ZIP Code

ASDC / FEDERAL OPENING ACCOUNT
430 SOUTH CAPITOL STREET S/E
WASHINGTON, DC. 20003

Name of Employer

Date (month,
day, year)

7/10/96

Amount of Each
Receipt this Period

\$1000.00

Occupation

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

Aggregate Year-to-Date > \$ 1000

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

PAC
8/13/96Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 10
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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code MACHINISTS NON-PARTISAN POLITICAL LEAGUE 9000 MACHINIST PLACE UPPER MARLBORO, MD 20772	Name of Employer Occupation	Date (month, day, year) 7/23/96	Amount of Each Receipt this Period \$5000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 5,000			
C. Full Name, Mailing Address and ZIP Code INTERNATIONAL UNION OF OPERATING ENGINEERS - EPEL 1125 17TH STREET NORTHWEST WASHINGTON, D.C. 20036	Name of Employer Occupation	Date (month, day, year) 7/24/96	Amount of Each Receipt this Period \$2000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 2,000			
D. Full Name, Mailing Address and ZIP Code MELVILLE CORPORATION POLITICAL ACTION COMMITTEE (MELPAC) ONE THERELL ROAD RYE, NY 10580	Name of Employer Occupation	Date (month, day, year) 7/31/96	Amount of Each Receipt this Period \$1,000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$ 1,000			
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

\$8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

IBEW- COPE
1125 - 15TH STREET N.W.
WASHINGTON D.C. 20005

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

\$1000.00

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 3,500

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$1,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 4 OF 10
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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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code GREENJOE 11 BRIMCOM STREET - SUITE 920 BOSTON, MA 02108	Name of Employer Occupation Aggregate Year-to-Date > \$ 400	Date (month, day, year) 7/22/96	Amount of Each Receipt this Period \$ 400.00
B. Full Name, Mailing Address and ZIP Code Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$ 400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

PNC
8/2/96Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code
SUNY PICTURES ENTERTAINMENT, PNC
10703 W. WASHINGTON BL.
TURNER BLDG. # 3014
COLUMBIA CITY, IN 46032

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

6/27/96

\$1,000.00

Occupation

Aggregate Year-to-Date > \$ 1,000

B. Full Name, Mailing Address and ZIP Code
AGENT FOR THE 90'S - FEOLLS
555 CALIFORNIA ST. SUITE 4900
SAN FRANCISCO, CA 94104

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

7/15/96

\$3,000.00

Occupation

Aggregate Year-to-Date > \$ 3,000

C. Full Name, Mailing Address and ZIP Code
FUND FOR DEMOCRATIC LEADERSHIP
300 CAPITOL MALL, SUITE 350
SACRAMENTO, CA 95814

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

7/15/96

\$1,000.00

Occupation

Aggregate Year-to-Date > \$ 1,000

D. Full Name, Mailing Address and ZIP Code
BOB MATSUI FOR CONGRESS
555 CAPITOL MALL, SUITE 1405
SACRAMENTO, CA 95814

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

7/11/96

\$1,000.00

Occupation

7/11/96

\$1,000.00

Aggregate Year-to-Date > \$ 2,000

E. Full Name, Mailing Address and ZIP Code
U.A. POLITICAL EDUCATION COMM.
901 MASSACHUSETTS AVE. N.W.
WASHINGTON, D.C. 20001

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

6/28/96

\$1,000.00

Occupation

Aggregate Year-to-Date > \$ 1,000

F. Full Name, Mailing Address and ZIP Code
COMMITTEE ON LETTER CARRIERS
POLITICAL EDUCATION (NALC, AFL-CIO)
100 INDIANA AVE. N.W.
WASHINGTON, D.C. 20001

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

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

7/11/96

\$1,000.00

Occupation

Aggregate Year-to-Date > \$ 1,000

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 10
FOR LINE NUMBER 116

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code

ATLA PAC
CONTRIBUTION ACCT.
1050 31ST STREET, N.W.
WASHINGTON, D.C. 20007

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☒ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$ 5,000

8/14/96

\$2,500.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Occupation

Receipt For:

☐ Primary☐ General☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 10
FOR LINE NUMBER 11C

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code
IRONWORKERS POLITICAL ACTION
LEAGUE
1750 N.Y. AVENUE N.W.
WASHINGTON D.C. 20006

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

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

Occupation

Aggregate Year-to-Date > \$ 1,000

8/5/96

\$1,000.00

B. Full Name, Mailing Address and ZIP Code
INTERNATIONAL ASSOC. OF FIRE
FIGHTERS
1750 NY AVE N.W.
WASHINGTON, D.C. 20006

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

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

Occupation

Aggregate Year-to-Date > \$ 2,500

7/26/96

\$1,000.00

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)Amount of Each
Receipt this Period

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$2,000

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

mc
8/28/96

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

PAGE 8 OF 110
FOR LINE NUMBER 116

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NAME OF COMMITTEE (in Full)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code
KENNETH FOR US SENATE CAMPAIGN
7602 PACIFIC ST. STE. LL NORTON
OMAHA, NE. 68114

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

8/20/96

\$10000.00

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

Aggregate Year-to-Date > \$ 2,000

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

C. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

D. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

E. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

F. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

G. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month,
day, year)

Amount of Each
Receipt this Period

Occupation

Receipt For: ☐ Primary ☐ General
☐ Other (specify):

Aggregate Year-to-Date > \$

SUBTOTAL of Receipts This Page (optional)

\$2,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 9 OF 10
FOR LINE NUMBER 11C

 PAC
8/24/96

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code AFSCME 1625 L. STREET N.W. WASHINGTON, D.C. 20036 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3,000	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$ 5000.00
B. Full Name, Mailing Address and ZIP Code NATL. EDUCATION ASSN. PAC 1201 16TH STREET N.W. WASHINGTON, D.C. 20038 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 5,000	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$ 5000.00
C. Full Name, Mailing Address and ZIP Code TE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$ 2,500.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year) 8/21/96	Amount of Each Receipt this Period \$

46

SUBTOTAL of Receipts This Page (optional)

\$12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

7/17/96
IN-KIND

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

PAGE 10 OF 10
FOR LINE NUMBER

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)

KEEFE FOR CONGRESS 1996

A. Full Name, Mailing Address and ZIP Code NCEC. 10 EAST 34TH STREET N.Y., N.Y. 10016	Name of Employer Occupation	Date (month, day, year) 7/17/96	Amount of Each Receipt this Period \$2,500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 2,500		
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

\$2,500

TOTAL This Period (last page this line number only)

\$40,900

Federal Election Commission
ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered

DATE OF RECEIPT

☐ First Class Mail

POSTMARKED

☒ Registered/Certified Mail

POSTMARKED

8-26-96

☐ No Postmark

☐ Postmark Illegible

☐ Received from the House Office of Records
and Registration

DATE OF RECEIPT

☐ Received from the Senate Office of Public
Records

DATE OF RECEIPT

☐ Other (Specify):

POSTMARKED

and/or DATE OF RECEIPT

JES

PREPARER

8-29-96

DATE PREPARED