

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 179 Allyn Street
 Check if different than previously reported. (ACC)
Hartford CT 06103

2. **FEC IDENTIFICATION NUMBER** C00167320
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 03 01 2005 through 03 31 2005

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 Emma Pierce

Signature of Treasurer Electronically Filed by Emma Pierce Date 03 31 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		46700.05
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	45487.99									
(c) Total Receipts (from Line 19)	58941.54	116079.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	104429.53	162780.04								
7. Total Disbursements (from Line 31)	42814.90	101165.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	61614.63	61614.63								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2805.93									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	22825.00	41450.00
(i) Itemized (use Schedule A)	11385.00	14810.00
(ii) Unitemized	34210.00	56260.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	17700.00
(c) Other Political Committees (such as PACs)	0.00	73960.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	10000.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	162.18	162.18
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	24569.36	31957.81
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	24569.36	31957.81
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	58941.54	116079.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34372.18	84122.18

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	4480.23	8343.31
(ii) Non-Federal Share.....	14137.44	28669.99
(b) Other Federal Operating Expenditures.....	17813.09	47548.79
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	36430.76	84562.09
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	4.06
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	6384.14	16599.26
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	6384.14	16599.26
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	42814.90	101165.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	28677.46	72495.42

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	34210.00	73960.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34210.00	73960.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22293.32	55892.10
37. Offsets to Operating Expenditures (from Line 15, page 3)	162.18	162.18
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22131.14	55729.92

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 224 W. Norwalk Road

City Norwalk State CT Zip Code 06850

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

Name of Employer Univ. of Hartford Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51381

Amount of Each Receipt this Period
350.00

Receipt

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

Mailing Address 300 Helen Street

City Hamden State CT Zip Code 06514-4336

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

Name of Employer IKAM Group Occupation Contractor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51438

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 111 Whitney Ave

City New Haven State CT Zip Code 06510-1232

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

Name of Employer Self Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51434

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1850.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Patsy Papandrea		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2005
Mailing Address 48 Holiday Hill Road		Transaction ID: 50420.C51356
City Meriden State CT Zip Code 06450-4747	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. Donna King		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005
Mailing Address 71 Aiken Street Apt .Q16 Norwalk DTC		Transaction ID: 50420.C51415
City Norwalk State CT Zip Code 06851-2144	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Office of the Treasurer Occupation Executive Assistant	Aggregate Year-to-Date 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. Donna King		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005
Mailing Address 71 Aiken Street Apt .Q16 Norwalk DTC		Transaction ID: 50420.C51380
City Norwalk State CT Zip Code 06851-2144	Amount of Each Receipt this Period 175.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Office of the Treasurer Occupation Executive Assistant	Aggregate Year-to-Date 200.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional)	550.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. James Maloney		Date of Receipt MM / DD / YYYY 03 / 18 / 2005
Mailing Address 15 Wooster Heights		Transaction ID: 50420.C51444
City Danbury	State CT	Zip Code 06810-7536
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Connecticut Resource Development	Occupation Executive	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Stewart Greenfield		Date of Receipt MM / DD / YYYY 03 / 01 / 2005
Mailing Address 279 Sturges Highway		Transaction ID: 50318.C51277
City Westport	State CT	Zip Code 06880-1722
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Oak Hill Partners	Occupation Investment Manager	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Claudia Baio-Downes		Date of Receipt MM / DD / YYYY 03 / 24 / 2005
Mailing Address 10 Ten Rod Highway Rocky Hill DTC		Transaction ID: 50420.C51369
City Rocky Hill	State CT	Zip Code 06067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 350.00
Name of Employer Self	Occupation Attorney	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	▶	1700.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 120 Bolivia Street

City State Zip Code
Willimantic CT 06226-2818

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

Name of Employer Self Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2005

Transaction ID: 50420.C51371

Amount of Each Receipt this Period
350.00

Receipt

B. Full Name (Last, First, Middle Initial)
Lori Ann Clymas

Mailing Address 9 Old County Road
Chester DTC

City State Zip Code
Chester CT 06412-1245

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

Name of Employer Self Employed Occupation
Consultant

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2005

Transaction ID: 50420.C51377

Amount of Each Receipt this Period
350.00

Receipt

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

Mailing Address 19 Stony Point Road

City State Zip Code
Westport CT 06880-5923

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

Name of Employer William Scheffler, Esq & Assoc Occupation
Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2005

Transaction ID: 50420.C51436

Amount of Each Receipt this Period
300.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial)
Barbara B. Kennelly

Mailing Address 95 Scarborough Street

City State Zip Code
Hartford CT 06105-1106

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

Name of Employer
Committee to Preserve SS & Med
Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2005

Transaction ID: 50420.C51347

Amount of Each Receipt this Period
1000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Anne Marie Sutton

Mailing Address 69 West Cross Road

City State Zip Code
New Canaan CT 06840-6542

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

Name of Employer
Self-Employed
Occupation
Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51406

Amount of Each Receipt this Period
100.00

Receipt

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

Mailing Address 10 Mansfield Street
Attn: Charles McCollam

City State Zip Code
Bethel CT 06801-1723

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

Name of Employer
INFORMATION REQUESTED
Occupation
INFORMATION REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1350.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51472

Amount of Each Receipt this Period
1350.00

Receipt

NOTE: Sole Proprietorship

SUBTOTAL of Receipts This Page (optional)	▶	2450.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address PO Box 8124

City State Zip Code
New Haven CT 06530-0124

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

Name of Employer Occupation
Marwood Group Government Relations

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
MM / DD / YYYY
03 / 24 / 2005

Transaction ID: 50420.C51343

Amount of Each Receipt this Period
350.00

Receipt

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

Mailing Address 18 East Liberty Street

City State Zip Code
Chester CT 06412-1204

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

Name of Employer Occupation
BL Companies President/CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2005

Transaction ID: 50318.C51278

Amount of Each Receipt this Period
2000.00

Receipt

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

Mailing Address 24 Valley View Drive

City State Zip Code
Newington CT 06111-5308

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

Name of Employer Occupation
Self Electrician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2005

Transaction ID: 50420.C51437

Amount of Each Receipt this Period
1500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3850.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 46
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Robert Tendler		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005
Mailing Address 916-B Heritage Village Southbury DTC		Transaction ID: 50420.C51384
City Southbury State CT Zip Code 06488-3840	Amount of Each Receipt this Period 525.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 525.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Korby		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2005
Mailing Address 195 Brooksvale Avenue		Transaction ID: 50420.C51345
City Hamden State CT Zip Code 06518-1233	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer USPS Occupation Letter Carrier	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Tong		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2005
Mailing Address 99 Chestnut Hill Road		Transaction ID: 50420.C51467
City Stamford State CT Zip Code 06903	Amount of Each Receipt this Period 1050.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Finn Dixon & Herling Occupation Attorney	Aggregate Year-to-Date ▼ 1050.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	1925.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Deborah Heinrich		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2005	
Mailing Address 11 Beaver Pond Road		Transaction ID: 50420.C51350	
City State Zip Code Madison CT 06443		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Childbirth Educ for Think- ing W		Occupation Teacher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. James Miller		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005	
Mailing Address 36 East Liberty Street		Transaction ID: 50420.C51440	
City State Zip Code Chester CT 06412		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Shephard Finkelview		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Sal DiNardo		Date of Receipt M M / D D / Y Y Y Y 03 / 18 / 2005	
Mailing Address 1883 Fairfield Beach Road 323 North Ave (Old Add)		Transaction ID: 50420.C51382	
City State Zip Code Bridgeport CT 06606-5125		Amount of Each Receipt this Period 2625.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Peter DiNardo Enterprises		Occupation Commercial Developer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 2625.00	

SUBTOTAL of Receipts This Page (optional) ▶	3325.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 1883 Fairfield Beach Road
323 North Ave (Old Add)

City State Zip Code
Bridgeport CT 06606-5125

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

Name of Employer Occupation
Peter DiNardo Enterprises Commercial Developer

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 2875.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51432

Amount of Each Receipt this Period
250.00

Receipt

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

Mailing Address 16 Penny Lane

City State Zip Code
Woodbridge CT 06525

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

Name of Employer Occupation
Bender Plumbing Supplies, Inc. Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1050.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2005

Transaction ID: 50420.C51355

Amount of Each Receipt this Period
1050.00

Receipt

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

Mailing Address 3656 Whitney Avenue. #3A
Hamden DTC

City State Zip Code
Hamden CT 06518

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

Name of Employer Occupation
Mass Mutual Insurance Agent

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1750.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2005

Transaction ID: 50420.C51383

Amount of Each Receipt this Period
1750.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	3050.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. William Malloy		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2005	
Mailing Address 119 Ralsey Road		Transaction ID: 50420.C51403	
City State Zip Code Stamford CT 06902		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Self Occupation Insurance			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Joseph Jordano		Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2005	
Mailing Address 400 Middletown Avenue		Transaction ID: 50318.C51274	
City State Zip Code North Haven CT 06473		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer ST of CT Occupation Attorney			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. Lisa Last		Date of Receipt M M / D D / Y Y Y Y Y 03 / 24 / 2005	
Mailing Address 17 Tommys Path		Transaction ID: 50420.C51362	
City State Zip Code Northford CT 06472		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer N/A Occupation Home Maker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 46
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 17 Tommys Path

City Northford State CT Zip Code 06472

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

Name of Employer N/A Occupation Home Maker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 5

Transaction ID: 50420.C51348

Amount of Each Receipt this Period
 175.00

Receipt

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

Mailing Address 10 Redwood Lane

City Woodbridge State CT Zip Code 06525

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

Name of Employer Information Requested Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 5

Transaction ID: 50420.C51352

Amount of Each Receipt this Period
 350.00

Receipt

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

Mailing Address 115 Stowe Drive

City Pittsburgh State PA Zip Code 15235

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

Name of Employer Self Occupation Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 4 / 2 0 0 5

Transaction ID: 50420.C51354

Amount of Each Receipt this Period
 500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1025.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Eric Cooper		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2005
Mailing Address 1924 Long Ridge Road		Transaction ID: 50420.C51393
City State Zip Code Stamford CT 06903-3232	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer National Urban Alliance	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jerome Rapoport		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2005
Mailing Address 122 Davenport Drive		Transaction ID: 50420.C51402
City State Zip Code Stamford CT 06902	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Stamford Self Storage	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. B. Lea DiNardo		Date of Receipt M M / D D / Y Y Y Y Y 03 / 18 / 2005
Mailing Address 1883 Fairfield Beach Road		Transaction ID: 50420.C51431
City State Zip Code Fairfield CT 06430	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Peter DiNardo Enterprises	Occupation Graffic Desinger	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	22825.00

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

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

FOR LINE NUMBER: PAGE 18 / 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. UNITEMIZED RECEIPTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 South Capitol Street, S.E.
 City State Zip Code
 WASHINGTON DC 20003-4024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 37251.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2005
Transaction ID: 50420.C51460
 Amount of Each Receipt this Period
 7621.90
 Transfer Memo
[MEMO ITEM]
 ITEMIZED:Victory Fund uni-temiz

B. UNITEMIZED RECEIPTS
 Full Name (Last, First, Middle Initial)
 Valentine Doyle
 Mailing Address 117 Brown Street
 City State Zip Code
 Hartford CT 06114-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Information Requested Information Requested
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2005
Transaction ID: 50420.C51459
 Amount of Each Receipt this Period
 250.00
 Transfer Memo
[MEMO ITEM]
 ITEMIZED: ASDC Dollars for Dem

C. UNITEMIZED RECEIPTS
 Full Name (Last, First, Middle Initial)
 Mailing Address 430 South Capitol Street, S.E.
 City State Zip Code
 WASHINGTON DC 20003-4024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 N/A N/A
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼
 37251.90

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2005
Transaction ID: 50420.C51457
 Amount of Each Receipt this Period
 29630.00
 Transfer Memo
[MEMO ITEM]
 ITEMIZED:ASDC unitemized

SUBTOTAL of Receipts This Page (optional) ► **0.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 46
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 315 Seabury Drive

City State Zip Code
Bloomfield CT 06002-2654

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

Name of Employer Retired Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2005

Transaction ID: 50420.C51458

Amount of Each Receipt this Period
300.00

Transfer Memo

[MEMO ITEM]
ITEMIZED: ASDC Dollars for Dem

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

Mailing Address 429 Sperry Road

City State Zip Code
Bethany CT 06524-

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

Name of Employer N/A Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
150.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2005

Transaction ID: 50818.C52048

Amount of Each Receipt this Period
150.00

Transfer Memo

[MEMO ITEM]
ITEMIZED: ASDC Dollars for Dem

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	0.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Leslie OBrien		Transaction ID: 50420.E10717 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 5	
Mailing Address 125 Summit Street		Amount of Each Disbursement this Period 2826.92	
City Willimantic State CT Zip Code 06226-2738	Purpose of Disbursement PAYROLL Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Global Stategies, Inc.		Transaction ID: 50420.E10706 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 5	
Mailing Address 611 Broadway Ste 206 Attn: Jon Silvan		Amount of Each Disbursement this Period 1000.00	
City New York State NY Zip Code 10012-2608	Purpose of Disbursement RESEARCH Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CT SUI		Transaction ID: 50318.E10663 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 5	
Mailing Address 200 Folly Brook Blvd.		Amount of Each Disbursement this Period 379.10	
City Wethersfield State CT Zip Code 06109-1153	Purpose of Disbursement TAXES Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4206.02
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 21 / 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. CT SUI		Transaction ID: 50420.E10725 Date of Disbursement MM / DD / YYYY 03 / 24 / 2005
Mailing Address 200 Folly Brook Blvd.		Amount of Each Disbursement this Period 221.13
City Wethersfield State CT Zip Code 06109-1153	TAXES	
Purpose of Disbursement TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Peoples Bank Mastercard		Transaction ID: 50420.E10687 Date of Disbursement MM / DD / YYYY 03 / 17 / 2005
Mailing Address PO Box 18055		Amount of Each Disbursement this Period 1000.00
City Bridgeport State CT Zip Code 06601-2855	SEE BELOW: CREDIT CARD 02-10 1	
Purpose of Disbursement SEE BELOW: CREDIT CARD 0210 1 Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. David Krause		Transaction ID: 50318.E10652 Date of Disbursement MM / DD / YYYY 03 / 10 / 2005
Mailing Address 30 Grant Hill Road		Amount of Each Disbursement this Period 1666.67
City Brooklyn State CT Zip Code 06234-	PAYROLL	
Purpose of Disbursement PAYROLL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2887.80
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 22 / 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. David Krause		Transaction ID: 50420.E10716 Date of Disbursement MM / DD / YYYY 03 / 24 / 2005
Mailing Address 30 Grant Hill Road		Amount of Each Disbursement this Period 1666.67
City Brooklyn State CT Zip Code 06234-	Purpose of Disbursement PAYROLL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

Full Name (Last, First, Middle Initial) B. Andrew Cascudo		Transaction ID: 50420.E10713 Date of Disbursement MM / DD / YYYY 03 / 24 / 2005
Mailing Address 20 Louise Lane		Amount of Each Disbursement this Period 923.08
City Manchester State CT Zip Code 06040-	Purpose of Disbursement PAYROLL	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL

Full Name (Last, First, Middle Initial) C. George Jepsen		Transaction ID: 50420.E10686 Date of Disbursement MM / DD / YYYY 03 / 15 / 2005
Mailing Address 49 Mountain View Drive		Amount of Each Disbursement this Period 3087.47
City West Hartford State CT Zip Code 06117-3028	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	5677.22
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 46

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Ritz Camera		Transaction ID: 51205.E11092 Date of Disbursement MM / DD / YYYY 03 / 15 / 2005
Mailing Address 982 Farmington Avenue		Amount of Each Disbursement this Period 291.50
City W Hartford State CT Zip Code 06107-	[MEMO ITEM] MEMO: PHOTOS	
Purpose of Disbursement PHOTOS		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. ADP		Transaction ID: 50420.E10748 Date of Disbursement MM / DD / YYYY 03 / 16 / 2005
Mailing Address 225 2nd Avenue		Amount of Each Disbursement this Period 48.22
City Waltham State MA Zip Code 02451-1122	PAYROLL SERVICES	
Purpose of Disbursement PAYROLL SERVICES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. IRS/FICA		Transaction ID: 50318.E10659 Date of Disbursement MM / DD / YYYY 03 / 10 / 2005
Mailing Address		Amount of Each Disbursement this Period 414.38
City Andover State MA Zip Code 05501-0001	TAXES	
Purpose of Disbursement TAXES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	462.60
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. IRS/FICA		Transaction ID: 50420.E10721	
Mailing Address		Date of Disbursement	
		MM / DD / YYYY 03 / 24 / 2005	
City Andover	State MA	Zip Code 05501-0001	Amount of Each Disbursement this Period
Purpose of Disbursement TAXES			414.38
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		TAXES
State: District:			

Full Name (Last, First, Middle Initial) B. Andrew Cascudo		Transaction ID: 50318.E10651	
Mailing Address 20 Louise Lane		Date of Disbursement	
		MM / DD / YYYY 03 / 10 / 2005	
City Manchester	State CT	Zip Code 06040-	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL			923.08
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		PAYROLL
State: District:			

Full Name (Last, First, Middle Initial) C. Leslie OBrien		Transaction ID: 50318.E10655	
Mailing Address 125 Summit Street		Date of Disbursement	
		MM / DD / YYYY 03 / 10 / 2005	
City Willimantic	State CT	Zip Code 06226-2738	Amount of Each Disbursement this Period
Purpose of Disbursement PAYROLL			2826.92
Candidate Name		Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		PAYROLL
State: District:			

SUBTOTAL of Disbursements This Page (optional)	▶	4164.38
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Anthem Blue Cross		Transaction ID: 50420.E10679 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 5
Mailing Address P.O. Box 778		Amount of Each Disbursement this Period 163.60
City Lewiston State ME Zip Code 04243-0778	Category/Type HEALTH INSURANCE	
Purpose of Disbursement HEALTH INSURANCE	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	HEALTH INSURANCE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) B. ADP		Transaction ID: 50420.E10749 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 5
Mailing Address 225 2nd Avenue		Amount of Each Disbursement this Period 48.22
City Waltham State MA Zip Code 02451-1122	Category/Type PAYROLL SERVICES	
Purpose of Disbursement PAYROLL SERVICES	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

Full Name (Last, First, Middle Initial) C. ADP		Transaction ID: 50420.E10747 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 5
Mailing Address 225 2nd Avenue		Amount of Each Disbursement this Period 48.22
City Waltham State MA Zip Code 02451-1122	Category/Type PAYROLL SERVICES	
Purpose of Disbursement PAYROLL SERVICES	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	PAYROLL SERVICES
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) ▶	260.04
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

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

Mailing Address 225 2nd Avenue

City Waltham State MA Zip Code 02451-1122

Purpose of Disbursement
PAYROLL SERVICES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 50701.E10897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

52.91

PAYROLL SERVICES

SUBTOTAL of Disbursements This Page (optional)

52.91

TOTAL This Period (last page this line number only)

17710.97

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Adam Wood		Transaction ID: 50420.E10720 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 5
Mailing Address 100 Oxbow Drive, Apt. B6		Amount of Each Disbursement this Period 2692.30
City Glastonbury State CT Zip Code 06033-1686	FEA PAYROLL	
Purpose of Disbursement FEA PAYROLL Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CT SUI		Transaction ID: 51215.E11114 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 5
Mailing Address 200 Folly Brook Blvd.		Amount of Each Disbursement this Period 98.46
City Wethersfield State CT Zip Code 06109-1153	TAXES	
Purpose of Disbursement TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. IRS/FUTA		Transaction ID: 50318.E10660 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 5
Mailing Address		Amount of Each Disbursement this Period 10.05
City Andover State MA Zip Code 01810-	TAXES	
Purpose of Disbursement TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2800.81
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. Anthem Blue Cross		Transaction ID: 51215.E11133 Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2005
Mailing Address P.O. Box 778		Amount of Each Disbursement this Period 299.42
City Lewiston State ME Zip Code 04243-0778	FEA HEALTH INSURANCE	
Purpose of Disbursement FEA HEALTH INSURANCE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. CT SUI		Transaction ID: 51215.E11113 Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2005
Mailing Address 200 Folly Brook Blvd.		Amount of Each Disbursement this Period 172.31
City Wethersfield State CT Zip Code 06109-1153	TAXES	
Purpose of Disbursement TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. IRS/FUTA		Transaction ID: 50420.E10723 Date of Disbursement M M / D D / Y Y Y Y 03 / 24 / 2005
Mailing Address		Amount of Each Disbursement this Period 7.38
City Andover State MA Zip Code 01810-	TAXES	
Purpose of Disbursement TAXES Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	479.11
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

Full Name (Last, First, Middle Initial) A. IRS/FICA		Transaction ID: 51215.E11120	
Mailing Address		Date of Disbursement	
		MM / DD / YYYY 03 / 24 / 2005	
City Andover	State MA	Zip Code 05501-0001	Amount of Each Disbursement this Period
Purpose of Disbursement TAXES		Category/ Type	205.96
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		TAXES
State:	District:		

Full Name (Last, First, Middle Initial) B. IRS/FICA		Transaction ID: 51215.E11119	
Mailing Address		Date of Disbursement	
		MM / DD / YYYY 03 / 10 / 2005	
City Andover	State MA	Zip Code 05501-0001	Amount of Each Disbursement this Period
Purpose of Disbursement TAXES		Category/ Type	205.96
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		TAXES
State:	District:		

Full Name (Last, First, Middle Initial) C. Adam Wood		Transaction ID: 50318.E10656	
Mailing Address 100 Oxbow Drive, Apt. B6		Date of Disbursement	
		MM / DD / YYYY 03 / 10 / 2005	
City Glastonbury	State CT	Zip Code 06033-1686	Amount of Each Disbursement this Period
Purpose of Disbursement FEA PAYROLL		Category/ Type	2692.30
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		FEA PAYROLL
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	3104.22
TOTAL This Period (last page this line number only)	6384.14

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peoples Bank Mastercard	Nature of Debt (Purpose): See Below: Credit Card 02-10 1
Mailing Address PO Box 18055	
City State ZIP Code Bridgeport CT 06601-2855	

Outstanding Balance Beginning This Period 1868.32	Transaction ID: 2LS50420.E10687	
Amount Incurred This Period 0.00	Payment This Period 1000.00	Outstanding Balance at Close of This Period 868.32

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Peoples Bank Mastercard	Nature of Debt (Purpose): Credit Card 0317 1
Mailing Address PO Box 18055	
City State ZIP Code Bridgeport CT 06601-2855	

Outstanding Balance Beginning This Period 0.00	Transaction ID: LS51205.E11090	
Amount Incurred This Period 1937.61	Payment This Period 0.00	Outstanding Balance at Close of This Period 1937.61

1) SUBTOTALS This Period This Page (optional).....	2805.93
2) TOTALS This Period (last page this line number only).....	2805.93
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

METHOD OF ALLOCATION FOR:

- SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
 CT DEMOCRATIC STATE CENTRAL COMMITTEE

USE ONLY ONE SECTION, A or B

A. State and Local Party Committees

Fixed Percentage (select one)

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- X Senate-Only Election Year (21% Federal)
- _____ Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees

Flat Minimum Federal Percentage

If the committee will allocate using the flat minimum percentage of 50% federal funds, check

or

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %

Nonfederal..... %

This ratio applies to (check all that apply):

- Administrative
- Generic Voter Drive
- Public Communications Referencing Party Only

SCHEDULE H2 (FEC Form 3X)**ALLOCATION RATIOS**

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NAME OF COMMITTEE (In Full)

CT DEMOCRATIC STATE CENTRAL COMMITTEE**RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

JJB 2005

ACTIVITY IS:

 Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

 New Revised Same as Previously Reported

FEDERAL %

50.00 %

NONFEDERAL %

50.00 %Transaction ID:
H2150420.J17

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 CT DEMOCRATIC STATE CENTRAL COMMITTEE

NAME OF ACCOUNT DSCG Non-Federal 179 Allyn Street, Sui	DATE OF RECEIPT M M / D D / Y Y Y Y 03 / 01 / 2005	TOTAL AMOUNT TRANSFERRED 12936.55
---	--	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		12936.55
i) Total Administrative		Transaction ID: H350318.C51269
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	
TOTAL This Period (Generic Voter Drive)	
TOTAL This Period (Exempt Activities)	
TOTAL This Period (Direct Fundraising)	
TOTAL This Period (Direct Candidate Support)	
TOTAL This Period (Public Communications Referring Only to Party)	
TOTAL This Period (Total Amount Transferred)	

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 CT DEMOCRATIC STATE CENTRAL COMMITTEE

NAME OF ACCOUNT DSCG Non-Federal 179 Allyn Street, Sui	DATE OF RECEIPT M M / D D / Y Y Y Y 0 3 / 2 4 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 11632.81
---	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		11632.81
i) Total Administrative		Transaction ID: H350420.C51312
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	24569.36
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	24569.36

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) SKAR LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 Wacona Avenue			Allocated Activity or Event Year-To-Date 21395.63		
City Waterbury	State CT	Zip Code 06705-	Date MM / DD / YYYY 03 / 01 / 2005		
Purpose of Disbursement: Rent			Transaction ID: H450318.E10627		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.00		2370.00		3000.00

B. Full Name (Last, First, Middle Initial) The Hartford Insurance			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 620			Allocated Activity or Event Year-To-Date 21745.91		
City New Hartford	State NY	Zip Code 13413-0620	Date MM / DD / YYYY 03 / 07 / 2005		
Purpose of Disbursement: Liability Insurance			Transaction ID: H450420.E10682		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
73.56		276.72		350.28

C. Full Name (Last, First, Middle Initial) Ace Printery			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 41 Walnut Street Attn: Kathy Quinn			Allocated Activity or Event Year-To-Date 22939.61		
City Hartford	State CT	Zip Code 06120-2829	Date MM / DD / YYYY 03 / 07 / 2005		
Purpose of Disbursement: Printing			Transaction ID: H450420.E10681		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.68		943.02		1193.70

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
954.24		3589.74		4543.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) DSL.NET			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 31785			Allocated Activity or Event Year-To-Date 23113.34		
City Hartford	State CT	Zip Code 06150-1785			
Purpose of Disbursement: Internet Services			Transaction ID: H450420.E10683		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
36.48		137.25		173.73

B. Full Name (Last, First, Middle Initial) Xerox			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 660501			Allocated Activity or Event Year-To-Date 23336.37		
City Dallas	State TX	Zip Code 75266-0501			
Purpose of Disbursement: Photo Copier			Transaction ID: H450420.E10680		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.84		176.19		223.03

C. Full Name (Last, First, Middle Initial) Sandler, Reiff, and Young PC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 50 East Street SE Ste 300			Allocated Activity or Event Year-To-Date 24536.37		
City Washington	State DC	Zip Code 20003-2620			
Purpose of Disbursement: Legal Retainer			Transaction ID: H450420.E10703		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
252.00		948.00		1200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
335.32		1261.44		1596.76

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Hon. Evelyn Mantilla			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 36 Charter Oak Plaza, Unit 2			Allocated Activity or Event Year-To-Date 26126.37		
City Hartford	State CT	Zip Code 06106-1914	Date MM / DD / YYYY 03 / 21 / 2005		
Purpose of Disbursement: Voter File			Transaction ID: H450420.E10702		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
333.90		1256.10		1590.00

B. Full Name (Last, First, Middle Initial) Mr. Saif Ibrahim			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 555 Windsor Street			Allocated Activity or Event Year-To-Date 27876.37		
City Hartford	State CT	Zip Code 06120-	Date MM / DD / YYYY 03 / 21 / 2005		
Purpose of Disbursement: Accounting Services			Transaction ID: H450420.E10705		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
367.50		1382.50		1750.00

C. Full Name (Last, First, Middle Initial) Voter Activation Network			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 54 Regent Street			Allocated Activity or Event Year-To-Date 33876.37		
City Cambridge	State MA	Zip Code 02140-	Date MM / DD / YYYY 03 / 21 / 2005		
Purpose of Disbursement: Voter File Software			Transaction ID: H450420.E10704		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1260.00		4740.00		6000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1961.40		7378.60		9340.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Weston Street			Allocated Activity or Event Year-To-Date 34026.37		
City Hartford	State CT	Zip Code 06101-	Date MM / DD / YYYY 03 / 22 / 2005		
Purpose of Disbursement: Permit Renewal			Transaction ID: H450420.E10708		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.50		118.50		150.00

B. Full Name (Last, First, Middle Initial) APC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6470 East Johns Crossing Suite 100			Allocated Activity or Event Year-To-Date 34056.20		
City Duluth	State GA	Zip Code 30097-	Date MM / DD / YYYY 03 / 22 / 2005		
Purpose of Disbursement: Conference Call			Transaction ID: H450420.E10709		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.26		23.57		29.83

C. Full Name (Last, First, Middle Initial) Andrew Cascudo			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 20 Louise Lane			Allocated Activity or Event Year-To-Date 34096.20		
City Manchester	State CT	Zip Code 06040-	Date MM / DD / YYYY 03 / 28 / 2005		
Purpose of Disbursement: Reimbursement: See Below			Transaction ID: H450420.E10731		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
46.16		173.67		219.83

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Ann Street Station			Allocated Activity or Event Year-To-Date 34551.60																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10727			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	8	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	2	8	/	2	0	0	5																
Hartford	CT	06103-																							
Purpose of Disbursement: Postage			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.63		359.77		455.40

B. Full Name (Last, First, Middle Initial) Carlos Quichez			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 34 Pumpkin Hill Road			Allocated Activity or Event Year-To-Date 34591.60																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10732			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	8	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	2	8	/	2	0	0	5																
New Milford	CT	06776-																							
Purpose of Disbursement: Reimbursement: See Below			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.40		31.60		40.00

C. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address Ann Street Station			Allocated Activity or Event Year-To-Date 34900.70																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10728			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	9	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	2	9	/	2	0	0	5																
Hartford	CT	06103-																							
Purpose of Disbursement: Postage			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.91		244.19		309.10

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
168.94		635.56		804.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) ProPark			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1 Union Place			Allocated Activity or Event Year-To-Date 35000.70		
City Hartford	State CT	Zip Code 06103-	Date M M / D D / Y Y Y Y 03 / 30 / 2005		
Purpose of Disbursement: Parking			Transaction ID: H450420.E10733		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

B. Full Name (Last, First, Middle Initial) Papas			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Union Street			Allocated Activity or Event Year-To-Date 35045.98		
City Hartford	State CT	Zip Code 06103-	Date M M / D D / Y Y Y Y 03 / 31 / 2005		
Purpose of Disbursement: Food			Transaction ID: H450420.E10734		
Activity or Event Identifier: ADMINISTRATION B 31					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
9.51		35.77		45.28

C. Full Name (Last, First, Middle Initial) Bob Kelly Florist			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 85 Seymour Street			Allocated Activity or Event Year-To-Date 42.40		
City Hartford	State CT	Zip Code 06106-5501	Date M M / D D / Y Y Y Y 03 / 17 / 2005		
Purpose of Disbursement: ITEMIZED: Flowers			Transaction ID: H450420.E10690		
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Flowers					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8.90		33.50		42.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.51		114.77		145.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Peoples Bank Mastercard			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 18055			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">43.62</div>			
City Bridgeport	State CT	Zip Code 06601-2855	Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10700			
Purpose of Disbursement: ITEMIZED: Fee						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Fee			Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10700			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">9.16</div>			<div style="border: 1px solid black; padding: 2px;">34.46</div>			<div style="border: 1px solid black; padding: 2px;">43.62</div>

B. Full Name (Last, First, Middle Initial) Southwest Airlines			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address PO Box 36647			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">492.00</div>			
City Dallas	State TX	Zip Code 75235-1647	Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10691			
Purpose of Disbursement: ITEMIZED: Travel						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Travel			Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10691			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">103.32</div>			<div style="border: 1px solid black; padding: 2px;">388.68</div>			<div style="border: 1px solid black; padding: 2px;">492.00</div>

C. Full Name (Last, First, Middle Initial) The Hartford Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 46 Prospect Avenue			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">392.28</div>			
City Hartford	State CT	Zip Code 06114-	Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10694			
Purpose of Disbursement: ITEMIZED: Food						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Food			Date M M / D D / Y Y Y Y 03 / 17 / 2005 Transaction ID: H450420.E10694			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">82.38</div>			<div style="border: 1px solid black; padding: 2px;">309.90</div>			<div style="border: 1px solid black; padding: 2px;">392.28</div>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;">0.00</div>		<div style="border: 1px solid black; padding: 2px;">0.00</div>		<div style="border: 1px solid black; padding: 2px;">0.00</div>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px;"></div>	<div style="border: 1px solid black; padding: 2px;"></div>	<div style="border: 1px solid black; padding: 2px;"></div>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) HostRocket.com			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 21 Corporate Drive			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">41.85</div>																		
City State Zip Code Clifton Park NY 12065-	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>03</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>17</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	03		D	D	17		Y	Y	Y	Y	2	0	0	5
M	M																				
03																					
D	D																				
17																					
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: ITEMIZE: website hosting			Transaction ID: H450420.E10688																		
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZE: website hosting																					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT																	
<div style="border: 1px solid black; padding: 2px; width: 100%;">8.79</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">33.06</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">41.85</div>																	

B. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address Ann Street Station			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">111.00</div>																		
City State Zip Code Hartford CT 06103-	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>03</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>17</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	03		D	D	17		Y	Y	Y	Y	2	0	0	5
M	M																				
03																					
D	D																				
17																					
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: ITEMIZED: Postage			Transaction ID: H450420.E10693																		
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Postage																					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT																	
<div style="border: 1px solid black; padding: 2px; width: 100%;">23.31</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">87.69</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">111.00</div>																	

C. Full Name (Last, First, Middle Initial) Max Bibos, Inc			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																		
Mailing Address 250 Main Street			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">128.33</div>																		
City State Zip Code Hartford CT 06106-	Category/ Type		Date <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>03</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>17</td><td></td></tr></table> / <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>			M	M	03		D	D	17		Y	Y	Y	Y	2	0	0	5
M	M																				
03																					
D	D																				
17																					
Y	Y	Y	Y																		
2	0	0	5																		
Purpose of Disbursement: ITEMIZED: Food			Transaction ID: H450420.E10695																		
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Food																					
FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT																	
<div style="border: 1px solid black; padding: 2px; width: 100%;">26.95</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">101.38</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">128.33</div>																	

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT	
<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>		<div style="border: 1px solid black; padding: 2px; width: 100%;">0.00</div>	

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>	<div style="border: 1px solid black; padding: 2px; width: 100%;"></div>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Kays Flower & Gifts			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 202 S Main Street			Allocated Activity or Event Year-To-Date 68.90																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10689			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	7	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	1	7	/	2	0	0	5																
Anahuac	TX	77514-																							
Purpose of Disbursement: ITEMIZED: Flowers			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Flowers																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.47		54.43		68.90

B. Full Name (Last, First, Middle Initial) Hilton Washington Towers			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 1919 Connecticut Avenue Way			Allocated Activity or Event Year-To-Date 498.83																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10692			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	7	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	1	7	/	2	0	0	5																
Washington	DC	20009-																							
Purpose of Disbursement: ITEMIZED: Lodge			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Lodge																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
104.75		394.08		498.83

C. Full Name (Last, First, Middle Initial) BLS Limo Group			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2120 West Virginia Avenue, NE			Allocated Activity or Event Year-To-Date 94.00																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>5</td></tr></table> Transaction ID: H450420.E10698			M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	7	/	2	0	0	5
M	M	/				D	D	/	Y	Y	Y	Y													
0	3	/	1	7	/	2	0	0	5																
Washington	DC	20002-																							
Purpose of Disbursement: ITEMIZED: Travel			Category/ Type																						
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Travel																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.74		74.26		94.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Executive Valet Parking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address 1353 South Street			Allocated Activity or Event Year-To-Date 24.40			
City Suffield	State CT	Zip Code 06078-	Date <input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: ITEMIZED: Travel			Transaction ID: H450420.E10699			
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] ITEMIZED: Travel			Category/Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
5.12			19.28			24.40

B. Full Name (Last, First, Middle Initial) State of Connecticut			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address State Library 231 Capitol Avenue			Allocated Activity or Event Year-To-Date 40.00			
City Hartford	State CT	Zip Code 06106-	Date <input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: Photo Copies			Transaction ID: H451205.E11089			
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] Photo Copies			Category/Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
8.40			31.60			40.00

C. Full Name (Last, First, Middle Initial) State of Connecticut			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC			
Mailing Address State Library 231 Capitol Avenue			Allocated Activity or Event Year-To-Date 40.00			
City Hartford	State CT	Zip Code 06106-	Date <input type="text" value="03"/> / <input type="text" value="28"/> / <input type="text" value="2005"/>			
Purpose of Disbursement: Photo Copies			Transaction ID: H451205.E11091			
Activity or Event Identifier: ADMINISTRATION B 31 [MEMO ITEM] Photo Copies			Category/Type			
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
8.40			31.60			40.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
0.00			0.00			0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT	

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
CT DEMOCRATIC STATE CENTRAL COMMITTEE

A. Full Name (Last, First, Middle Initial) Dillon Mailing Bureau Inc.			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 114 Shield Street			Allocated Activity or Event Year-To-Date 1967.32		
City West Hartford	State CT	Zip Code 06110-1920	Date MM / DD / YYYY 03 / 10 / 2005		
Purpose of Disbursement: Mailing for JJB			Transaction ID: H450420.E10684		
Activity or Event Identifier: JJB 2005					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
747.50		747.50		1495.00

B. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Ann Street Station			Allocated Activity or Event Year-To-Date 1967.32		
City Hartford	State CT	Zip Code 06103-	Date MM / DD / YYYY 03 / 17 / 2005		
Purpose of Disbursement: Postage			Transaction ID: H450420.E10685		
Activity or Event Identifier: JJB 2005					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
148.00		148.00		296.00

C. Full Name (Last, First, Middle Initial) United States Postal Service			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Ann Street Station			Allocated Activity or Event Year-To-Date 1967.32		
City Hartford	State CT	Zip Code 06103-	Date MM / DD / YYYY 03 / 18 / 2005		
Purpose of Disbursement: Postage			Transaction ID: H450420.E10701		
Activity or Event Identifier: JJB 2005					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
88.16		88.16		176.32

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
983.66		983.66		1967.32

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
4480.23		14137.44		18617.67

Form/Schedule: **F3XA**

Transaction ID: **C00167320**

Q1. Committee filed amendments to previous reports, February 2005 Monthly and March 2005 Monthly, so that Lines 21(a)(i), 21(a)(ii), 21(b), 21(c), 30(b), 30(c) and 32 of Column B are now accurate. Q2. Committee inadvertently failed to disclose memo text for memo entries on Line 12 of Schedule A. Said text is now disclosed and \$8321.90 of activity now corresponds with the ASDC Dollars for Democrats Program. Q3. Committee filed amendments to previous reports, February 2005 Monthly and March 2005 Monthly, so that outstanding balances are now disclosed on previous reports.