

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

LARSON FOR CONGRESS

ADDRESS (number and street) 29 RUFF CIRCLE

Check if different than previously reported. (ACC)

GLASTONBURY CT 06033

2. **FEC IDENTIFICATION NUMBER** C00330142

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

3. IS THIS REPORT NEW (N) OR AMENDED (A)

CT 01

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

General (30G) Runoff (30R) Special (30S)

Election on [] [] [] in the State of []

5. Covering Period 04 23 2008 through 06 30 2008

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 Barry Feldman

Signature of Treasurer Electronically Filed by Barry Feldman Date 07 14 2008

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

LARSON FOR CONGRESS

Report Covering the Period: From:

M	M
0	4

D	D
2	3

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	348279.26	1040534.81
(b) Total Contribution Refunds (from Line 20(d)).....	19000.00	32250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	329279.26	1008284.81
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	113222.73	449768.86
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	113222.73	449768.86
8. Cash on Hand at Close of Reporting Period (from Line 27).....	363738.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
LARSON FOR CONGRESS

Report Covering the Period: From:

M	M
0	4

D	D
2	3

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

192884.50

427182.16

(ii) Unitemized.....

15088.07

38588.07

(iii) TOTAL of contributions

207972.57

465770.23

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

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

140306.69

574764.58

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

348279.26

1040534.81

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

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

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS

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

1057.86

15115.18

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

349337.12

1055649.99

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	113222.73	449768.86
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	2000.00
(b) Political Party Committees.....	19000.00	30250.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	19000.00	32250.00
21. OTHER DISBURSEMENTS.....	64350.00	486167.40
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	196572.73	968186.26

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	210974.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	349337.12
25. SUBTOTAL (add Line 23 and Line 24).....	560311.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	196572.73
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	363738.91

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 / 196 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) G. L. Agrawal</p> <p>Mailing Address 22 Hampden Circle</p> <p>City State Zip Code Simsbury CT 06070</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation R&D Dynamics Corp. Engineer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention 1000.00</p>	<p>Date of Receipt 05 / 01 / 2008</p> <p>Transaction ID: SA11AI.26355</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Kenneth R. Alleyne M.D.</p> <p>Mailing Address 837 Prospect Avenue</p> <p>City State Zip Code West Hartford CT 06105</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Eastern Orthopaedics & Sports Physician</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00</p>	<p>Date of Receipt 06 / 30 / 2008</p> <p>Transaction ID: SA11AI.27252</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Frank M. Antonacci</p> <p>Mailing Address 100 Maple Street</p> <p>City State Zip Code Somersville CT 06072</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Lindy Farms Horse Trainer</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention 250.00</p>	<p>Date of Receipt 05 / 02 / 2008</p> <p>Transaction ID: SA11AI.26310</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mohammed Saud Anwar

Mailing Address 93 Rockledge Drive

City State Zip Code
South Windsor CT 06074

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

Name of Employer Occupation
NEPA LLC Executive

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26304

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Anthony V. Avallone

Mailing Address 75 Broad Street

City State Zip Code
Milford CT 06460

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

Name of Employer Occupation
Avallone, DiBella & Associates Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.26526

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 22 Pasture Lane

City State Zip Code
West Simsbury CT 06092

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

Name of Employer Occupation
The Hartford Insurance Executive

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26213

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) **1500.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
San Manuel Band of Mission Indians

Mailing Address 26569 Community Center Drive

City Highland State CA Zip Code 92346

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

Name of Employer N/A Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ **300.00**

Date of Receipt **05 / 01 / 2008**
Transaction ID: SA11AI.26330
 Amount of Each Receipt this Period **300.00**

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

B. Full Name (Last, First, Middle Initial)
San Manuel Band of Mission Indians

Mailing Address 26569 Community Center Drive

City Highland State CA Zip Code 92346

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

Name of Employer N/A Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **2000.00**

Date of Receipt **05 / 01 / 2008**
Transaction ID: SA11AI.26332
 Amount of Each Receipt this Period **1700.00**

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

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

Mailing Address 1110 Propsect Avenue

City Hartford State CT Zip Code 06105

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **600.00**

Date of Receipt **06 / 16 / 2008**
Transaction ID: SA11AI.27154
 Amount of Each Receipt this Period **500.00**

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

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
William P. Beccaro

Mailing Address 12 New City Street

City State Zip Code
Essex CT 06426

FEC ID number of contributing federal political committee. C

Name of Employer Self-employed Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2008

Transaction ID: SA11AI.26650

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Henry M. Beck

Mailing Address 41 Sleepy Hollow Rd.

City State Zip Code
Columbia CT 06237

FEC ID number of contributing federal political committee. C

Name of Employer Halloran & Sage Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼
Convention

250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26250

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Penelope I. Bellamy

Mailing Address 276 Thimble Islands Rd.

City State Zip Code
Stony Creek CT 06405

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 02 / 2008

Transaction ID: SA11AI.26781

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher D. Bernard

Mailing Address 19 Hampton Drive

City State Zip Code
Woodbridge CT 06525

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

Name of Employer Occupation
Koskoff, Koskoff & Bieder Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.27162

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Richard A. Bieder

Mailing Address 19 Millertown Road

City State Zip Code
Bedford NY 10506

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

Name of Employer Occupation
Koskoff, Koskoff & Bieder, P.C. Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.27168

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Peter G. Boucher

Mailing Address 1817 Orchard Road

City State Zip Code
Berlin CT 06037

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

Name of Employer Occupation
Halloran & Sage, LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26240

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Jane Boyle

Mailing Address 210 South Road

City State Zip Code
Farmington CT 06032

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

Name of Employer Occupation
ING Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **500.00**

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2008

Transaction ID: SA11AI.27091

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Francis J. Brady

Mailing Address 14 Thronebrook Road

City State Zip Code
West Granby CT 06090

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

Name of Employer Occupation
Murtha Cullina LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **500.00**

Date of Receipt

M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26297

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Dorothy Brdar

Mailing Address 109 Lake Ridge Road

City State Zip Code
Southbury CT 06488

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

Name of Employer Occupation
None None

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **250.00**

Date of Receipt

M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11AI.26400

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 196
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) William Breetz		Date of Receipt
	Mailing Address 159 North Beacon Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 01 / 2008
	City	State	Zip Code
	Hartford	CT	06105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26415
Name of Employer Conn. Urban Legal Initiative, Inc.		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Kevin P. Brown		Date of Receipt
	Mailing Address 234 Gilead Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 08 / 2008
	City	State	Zip Code
	Hebron	CT	06248
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26555
Name of Employer ING		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Michael O. Brown		Date of Receipt
	Mailing Address 102 High Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 05 / 2008
	City	State	Zip Code
	Bethany	CT	06524
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26520
Name of Employer UTC Power		Occupation Vice Pres. - Bus. Dev. & Gen. Counsel	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 250.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Patricia V. Bussa

Mailing Address 101 Clark Hill Road

City State Zip Code
South Glastonbury CT 06073

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.27291

Amount of Each Receipt this Period
120.00

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

B.

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

Mailing Address 17 Green Briar

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Northeast Utilities Occupation Senior Vice President & Gen. Counsel

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 13 / 2008

Transaction ID: SA11AI.26568

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Christopher Byrd

Mailing Address 27 Pilgrim Road

City State Zip Code
West Hartford CT 06117

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

Name of Employer Evolution Benefits, Inc. Occupation Exec. Vice Pres. - Operations & Dev.

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26388

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1370.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 196
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John F. Byrnes

Mailing Address 20 Colony Road

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
R. C. Knox & Company, Inc. Insurance

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26285

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Michael R. Bzdyra

Mailing Address 47 Fairlawn Drive

City State Zip Code
Wallingford CT 06492

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

Name of Employer Occupation
Conn. Resources & Recovery Aut Public Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11AI.26339

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 63 Brownwall Avenue

City State Zip Code
Hartford CT 06106

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

Name of Employer Occupation
SINA, Inc. Executive/CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26300

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Anthony Cacace	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 32 Oak Hill Terrace	Transaction ID: SA11AI.26342
	City State Zip Code Haddam CT 06438	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer GKN Structures	Occupation CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00	

B.	Full Name (Last, First, Middle Initial) Michael A. Cantor	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 19 Foxcroft Road	Transaction ID: SA11AI.26261
	City State Zip Code West Hartford CT 06119	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Cantor Coburn LLP	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 750.00	

C.	Full Name (Last, First, Middle Initial) Shari G. Cantor	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 19 Foxcroft Road	Transaction ID: SA11AI.26262
	City State Zip Code West Hartford CT 06119	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer None	Occupation Volunteer	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Nicholas R. Carbone

Mailing Address 2 Park Place

City State Zip Code
Hartford CT 06106

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Vincent J. Carbone

Mailing Address 25 Garden Street

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Carbone's Restaurant Occupation Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Amount of Each Receipt this Period 250.00

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

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

Mailing Address 83 Peach Tree LN

City State Zip Code
Bristol CT 06010

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

Name of Employer State of Connecticut Occupation IS Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven C. Casey

Mailing Address 83 Peach Tree LN

City Bristol State CT Zip Code 06010

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

Name of Employer State of Connecticut Occupation IS Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 05 / 27 / 2008
Transaction ID: SA11AI.26733
 Amount of Each Receipt this Period: 50.00

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

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

Mailing Address 21 New Britain Avenue

City Rocky Hill State CT Zip Code 06067

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

Name of Employer CT Construction and Labor Mgmt Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼ Convention

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.26266
 Amount of Each Receipt this Period: 250.00

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

C. Full Name (Last, First, Middle Initial)
Shaun B. Cashman

Mailing Address 21 New Britain Avenue

City Rocky Hill State CT Zip Code 06067

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

Name of Employer CT Construction and Labor Mgmt Occupation Executive Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: SA11AI.27498
 Amount of Each Receipt this Period: 150.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Ann M. Catino
Mailing Address 104 Chandler
City Windsor State CT Zip Code 06095
FEC ID number of contributing federal political committee. **C**
Name of Employer Halloran & Sage, LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
500.00
Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26241
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David T. Chase
Mailing Address 225 Asylum Street
City Hartford State CT Zip Code 06103
FEC ID number of contributing federal political committee. **C**
Name of Employer Chase Enterprises Occupation Real Estate
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
1000.00
Date of Receipt 05 / 01 / 2008
Transaction ID: SA11AI.26371
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Patricia J. Christiana
Mailing Address 114 Steep Hollow Lane
City Manchester State CT Zip Code 06040
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation None
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify)
294.50
Date of Receipt 05 / 27 / 2008
Transaction ID: SA11AI.26859
Amount of Each Receipt this Period 44.50
In-kind - Supplies
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1544.50
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patricia J. Christiana

Mailing Address 114 Steep Hollow Lane

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
None None

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **344.50**

Date of Receipt
M M / D D / Y Y Y Y
05 / 28 / 2008

Transaction ID: SA11AI.26684

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Pamela A. Churchill

Mailing Address 19 Capitol Avenue

City State Zip Code
Hartford CT 06106

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

Name of Employer Occupation
Churchill & Associates Non-Profit Work

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **250.00**

Date of Receipt
M M / D D / Y Y Y Y
04 / 30 / 2008

Transaction ID: SA11AI.26391

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Peter J. Cimini

Mailing Address 168 Ridgewood Drive

City State Zip Code
Rocky Hill CT 06067

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

Name of Employer Occupation
Capital Strategies Group Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26231

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) **1300.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carol S. Clapp

Mailing Address 31 Howland Road

City State Zip Code
West Hartford CT 06107

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

Name of Employer Occupation
The Hartford Insurance Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.26789

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Thomas J. Clark

Mailing Address 190 Bloomfield Avenue

City State Zip Code
Hartford CT 06105

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

Name of Employer Occupation
Blue State Coffee Business

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26494

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Peter J. Clarke

Mailing Address 22 Silo Hill Road

City State Zip Code
Madison CT 06443

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

Name of Employer Occupation
Northeast Utilities Vice President - Shared Services

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 13 / 2008

Transaction ID: SA11AI.26569

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Charles Clayman
 Mailing Address 205 E. 31st Street
 City State Zip Code
 New York NY 10016
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Clayman & Rosenberg Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Sanford Cloud Jr.
 Mailing Address 25 Mountain Spring Road
 City State Zip Code
 Farmington CT 06032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The Cloud Company, LLC Atty./Real Estate Dev.
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jordan M. Cohen
 Mailing Address 214 Spencer Street
 City State Zip Code
 Manchester CT 06040
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Waverly Markets/ShopRite Executive
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention
 Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard Z. Cohen

Mailing Address 29 Green Hills Drive

City State Zip Code
Bolton CT 06043

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

Name of Employer Occupation
Waverly Markets, LLC President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26232

Amount of Each Receipt this Period
2200.00

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

B. Full Name (Last, First, Middle Initial)
Richard Z. Cohen

Mailing Address 29 Green Hills Drive

City State Zip Code
Bolton CT 06043

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

Name of Employer Occupation
Waverly Markets, LLC President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26233

Amount of Each Receipt this Period
300.00

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

C. Full Name (Last, First, Middle Initial)
Sue Ann Collins

Mailing Address 15 Governors Row

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
ING CFO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.26519

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Sue Ann Collins

Mailing Address 15 Governors Row

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
ING CFO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
500.00

Transaction ID: SA11AI.26833

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

B. Full Name (Last, First, Middle Initial)
Brian D. Comer

Mailing Address 26 Aspenwood

City State Zip Code
Weatogue CT 06089

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

Name of Employer Occupation
ING Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
1000.00

Transaction ID: SA11AI.27101

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

C. Full Name (Last, First, Middle Initial)
David W. Cooney

Mailing Address 27 Casrnoustie Circle

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
RisCassi & Davis, P.C. Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Amount of Each Receipt this Period
250.00

Transaction ID: SA11AI.26503

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 196 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) M. Timothy Corbett Mailing Address 11 Mountain Spring Road City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. C Name of Employer Occupation Hartford Financial Services Executive Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention Election Cycle-to-Date 250.00	Date of Receipt <table border="1" style="width: 100%;"> <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>4</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Transaction ID: SA11AI.26390 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	4		3	0		2	0	0	8	250.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		3	0		2	0	0	8													
250.00																						

B. Full Name (Last, First, Middle Initial) Mary B. Coursey Mailing Address 21 Walbridge Road City State Zip Code West Hartford CT 06119 FEC ID number of contributing federal political committee. C Name of Employer Occupation Coursey & Co. Public Affairs Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention Election Cycle-to-Date 400.00	Date of Receipt <table border="1" style="width: 100%;"> <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>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Transaction ID: SA11AI.26269 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>400.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8	400.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	8													
400.00																						

C. Full Name (Last, First, Middle Initial) Robert B. Cox Mailing Address 2015 Chapel Street City State Zip Code New Haven CT 06515 FEC ID number of contributing federal political committee. C Name of Employer Occupation Halloran & Sage, LLP Attorney Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention Election Cycle-to-Date 500.00	Date of Receipt <table border="1" style="width: 100%;"> <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>5</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> Transaction ID: SA11AI.26242 Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr> <td>500.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	2		2	0	0	8	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	2		2	0	0	8													
500.00																						

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1150.00</td> </tr> </table>	1150.00
1150.00		
TOTAL This Period (last page this line number only) ▶	<table border="1" style="width: 100%; height: 20px;"> <tr> <td> </td> </tr> </table>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Barry J. Cregan
 Mailing Address 340 East 64th Street
 City State Zip Code
 New York NY 10021
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2008
Transaction ID: SA11AI.27284
 Amount of Each Receipt this Period
 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Foxwoods Resort Casino President
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Andrew R. Crumbie
 Mailing Address 74 Tumblebrook Lane
 City State Zip Code
 West Hartford CT 06117
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 30 / 2008
Transaction ID: SA11AI.27286
 Amount of Each Receipt this Period
 300.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael Carroll Culhane
 Mailing Address 15 Kimberwick Court
 City State Zip Code
 Middlebury CT 06762
 Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2008
Transaction ID: SA11AI.26287
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Connecticut Catholic Conf. Executive Director
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1050.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Daniel R. Cunningham

Mailing Address 7808 Creekside View Lane

City State Zip Code
Springfield VA 22153

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

Name of Employer PMA Group Occupation Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1000.00

Transaction ID: SA11AI.27479

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

B. Full Name (Last, First, Middle Initial)
Raymond F. Damato

Mailing Address 240 New State Road

City State Zip Code
Manchester CT 06040

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

Name of Employer Self-employed Occupation Residential Rentals

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period: 1810.00

Transaction ID: SA11AI.27294

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

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

Mailing Address 221 Trumbull Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Hartford Stage Occupation Dev. Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11AI.26544

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

SUBTOTAL of Receipts This Page (optional) ► **1310.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Craig E. Dawley

Mailing Address 15 Settlement Road

City Amston State CT Zip Code 06231

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

Name of Employer Pinnacle Group, Inc. Occupation Insurance Agent

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26308
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
John G. Day

Mailing Address 96 Lost Acres Road

City North Granby State CT Zip Code 06060

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

Name of Employer University of Connecticut Occupation Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.26583
 Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
Pauline A. Dean

Mailing Address 40 Stoughton Road

City East Windsor State CT Zip Code 06088

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.27501
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 27 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 500 Farmington Avenue

City State Zip Code
Hartford CT 06105

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

Name of Employer Arrow Pharmacies Occupation President/CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.27277

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 15 Pine Tree Lane

City State Zip Code
Avon CT 06001

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

Name of Employer Kasden Fuel Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼
Convention

Election Cycle-to-Date ▼ 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	2	/	2	0	0	8

Transaction ID: SA11AI.26230

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 15 Pine Tree Lane

City State Zip Code
Avon CT 06001

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

Name of Employer Kasden Fuel Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

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

Transaction ID: SA11AI.26772

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 15 Pine Tree Lane

City Avon State CT Zip Code 06001

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

Name of Employer Kasden Fuel Occupation Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 06 / 10 / 2008
Transaction ID: SA11AI.27106
 Amount of Each Receipt this Period 500.00

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

B. Full Name (Last, First, Middle Initial)
Joanne E. DelMastro

Mailing Address 96 Colton Road

City Glastonbury State CT Zip Code 06033

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

Name of Employer Prudential CT Realty Occupation Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26306
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 34 Chimney Sweep Road

City Wallingford State CT Zip Code 06492

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

Name of Employer GKN Aerospace Occupation Senior Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26498
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rebecca M. DeRosa

Mailing Address 1101 S. Arlington Ridge Road

City State Zip Code
Arlington VA 22202

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

Name of Employer Occupation
The PMA Group Associate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 15 / 2008

Transaction ID: SA11AI.27475

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Timothy J. Devanney

Mailing Address 70 Porter Street

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
Highland Park Market Grocer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26221

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Kevin J. Devine

Mailing Address 131 Preston Allen Road

City State Zip Code
Lisbon CT 06351

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

Name of Employer Occupation
Electric Boat Vice President of M&M

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26483

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donna D. DiBella

Mailing Address 91 North Cove Road

City State Zip Code
Old Saybrook CT 06475

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26281

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Marc A. DiBella

Mailing Address 1 Gold Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Avallone, DiBella & Associates Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26280

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Marc A. DiBella

Mailing Address 1 Gold Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Avallone, DiBella & Associates Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.27256

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Robert J. Dotchin

Mailing Address 412 North Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
The Advocacy Group Government Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.27218

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
William M. Dufford

Mailing Address 240 Commerce Street

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation
Dufford Construction Co. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26511

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
N/A East. Band of Cherokee Indians

Mailing Address P.O. Box 455

City State Zip Code
Cherokee NC 28719

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

Name of Employer Occupation
N/A N/A

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.27217

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2750.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard E. Efford
Mailing Address 6400 Velleity Lane
City Springfield State VA Zip Code 22152
FEC ID number of contributing federal political committee. **C**
Name of Employer PMA Group Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.27482
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David J. Elliott
Mailing Address 55 Fawn Run
City Glastonbury State CT Zip Code 06033
FEC ID number of contributing federal political committee. **C**
Name of Employer Day Pitney LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 06 / 17 / 2008
Transaction ID: SA11AI.27237
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John R. Emra Jr.
Mailing Address 768 E. Broadway
City Milford State CT Zip Code 06400
FEC ID number of contributing federal political committee. **C**
Name of Employer AT&T Occupation Regional Vice President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention 250.00
Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26303
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Juda J. Epstein

Mailing Address 3543 Main Street

City State Zip Code
Bridgeportt CT 06606

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

Name of Employer Self-employed Occupation
Self-employed Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11AI.27212

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 100 Pearl Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Self-employed Occupation
Self-employed Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11AI.26353

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 100 Pearl Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Self-employed Occupation
Self-employed Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
05 / 29 / 2008

Transaction ID: SA11AI.26643

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **2650.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Stephanie S. Farber PhD.
Mailing Address 14 Ozone Road

City State Zip Code
Branford CT 06405

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.26779

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
John B. Farley
Mailing Address 43 Fernwood Road

City State Zip Code
West Hartford CT 06119

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

Name of Employer Halloran & Sage, LLP Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26237

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Toni M. Fatone
Mailing Address 100 Ferncliff Drive

City State Zip Code
West Hartford CT 06117

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

Name of Employer Conn. Assoc. of Health Care Facilities Occupation Executive Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.26542

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Carl R. Ficks, Jr.
Mailing Address 7 Belgravia Terrace
City Farmington State CT Zip Code 06032
FEC ID number of contributing federal political committee. **C**
Name of Employer Halloran & Sage, LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
500.00
Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26239
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Betsy Fink
Mailing Address 20 Marshall Street
City Norwalk State CT Zip Code 06854
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Farm Management
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
2300.00
Date of Receipt 05 / 06 / 2008
Transaction ID: SA11AI.26532
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Jesse Fink
Mailing Address 20 Marshall Street
City Norwalk State CT Zip Code 06854
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Investor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
2300.00
Date of Receipt 05 / 06 / 2008
Transaction ID: SA11AI.26534
Amount of Each Receipt this Period 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **5100.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 196
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial) David Flanagan		Date of Receipt MM / DD / YYYY 05 / 02 / 2008
Mailing Address 241 S. Water Street		Transaction ID: SA11AI.26224
City East Windsor	State CT	Zip Code 06088
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer East Hartford Public Schools	Occupation Supervisor of Physical Education	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 350.00	

B.

Full Name (Last, First, Middle Initial) Sheila Burke Flanagan		Date of Receipt MM / DD / YYYY 05 / 01 / 2008
Mailing Address 102 Butternut Road		Transaction ID: SA11AI.26351
City Manchester	State CT	Zip Code 06040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

C.

Full Name (Last, First, Middle Initial) Brian J. Foley		Date of Receipt MM / DD / YYYY 05 / 15 / 2008
Mailing Address 76 Hartford Road		Transaction ID: SA11AI.26580
City Simsbury	State CT	Zip Code 06070
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Apple Healthcare	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 196
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Nathan L. Frank</p> <p>Mailing Address P.O. Box 370061</p> <hr/> <p>City State Zip Code West Hartford CT 06137</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Hartford Insurance</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 02 / 2008</p> <p>Transaction ID: SA11AI.26770</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Joel Freedman</p> <p>Mailing Address 213 Tryon Street</p> <hr/> <p>City State Zip Code South Glastonbury CT 06073</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation The Hartford Attorney</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 02 / 2008</p> <p>Transaction ID: SA11AI.26212</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Kelly Ramsey Fuhlbrigge</p> <p>Mailing Address 34 Ellsworth Lane</p> <hr/> <p>City State Zip Code Ellington CT 06029</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Conn. Credit Union League Vice President</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 10 / 2008</p> <p>Transaction ID: SA11AI.27239</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dominic Fulco III

Mailing Address 35 Bancroft Road

City East Hartford State CT Zip Code 06118

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

Name of Employer Reid & Riege P.C. Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 250.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26267
 Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Thomas Galvin DDS

Mailing Address 246 Mountain Road

City Glastonbury State CT Zip Code 06033

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

Name of Employer Self-employed Occupation Dentist

Receipt For: 2008
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 06 / 25 / 2008
Transaction ID: SA11AI.27204
 Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
Marilda L. Gandara

Mailing Address 155 Scarborough Street

City Hartford State CT Zip Code 06105

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

Name of Employer Aetna Foundation Occupation President

Receipt For: 2008
 Primary General
 Other (specify)

Election Cycle-to-Date 2700.00

Date of Receipt 06 / 02 / 2008
Transaction ID: SA11AI.26765
 Amount of Each Receipt this Period 200.00

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

SUBTOTAL of Receipts This Page (optional) **700.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 5 Rivendell Road

City Marlborough State CT Zip Code 06447

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 25 / 2008
Transaction ID: SA11AI.27197
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 17 North Main Street

City West Hartford State CT Zip Code 06107

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

Name of Employer Gent Financial Group Occupation Financial Planner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 27 / 2008
Transaction ID: SA11AI.26740
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 4500 28th Road S

City Arlington State VA Zip Code 22206

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

Name of Employer The PMA Group Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.27487
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edward T. Gilligan
Mailing Address 59 Lantern Lane

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Self-employed Occupation
Self-employed Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26416

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Edward T. Gilligan
Mailing Address 59 Lantern Lane

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Self-employed Occupation
Self-employed Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 15 / 2008

Transaction ID: SA11AI.27495

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Paul T. Glover
Mailing Address 648 Fern Street

City State Zip Code
West Hartford CT 06107

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

Name of Employer Self-employed Occupation
Self-employed Marketing

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 02 / 2008

Transaction ID: SA11AI.26773

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeffrey F. Gostyla

Mailing Address 14 Sturbridge Lane

City Avon State CT Zip Code 06001

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

Name of Employer: Halloran & Sage, LLP Occupation: Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.26244
 Amount of Each Receipt this Period: 250.00

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

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

Mailing Address 4718 N. 36th Street

City Arlington State VA Zip Code 22207

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 05 / 23 / 2008
Transaction ID: SA11AI.26601
 Amount of Each Receipt this Period: 500.00

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

C. Full Name (Last, First, Middle Initial)
Alan E. Green

Mailing Address 4 Goodwin Circle

City Hartford State CT Zip Code 06105

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

Name of Employer: Housing Auth. of Hartford Occupation: Housing Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.27282
 Amount of Each Receipt this Period: 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kaylene H. Green
 Mailing Address P.O. Box 3170
 City State Zip Code
 Oakton VA 22124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 The PMA Group Government Relations
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2008
Transaction ID: SA11AI.26824
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Carolyn B. Greenspan
 Mailing Address 10 North Branford Road
 City State Zip Code
 Wallingford CT 06492
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2008
Transaction ID: SA11AI.26292
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James M. Griffin Jr.
 Mailing Address 259 Duncaster Road
 City State Zip Code
 Bloomfield CT 06002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Self-employed Economist
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2008
Transaction ID: SA11AI.27105
 Amount of Each Receipt this Period
 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 35 Saddle Ridge Drive

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2008

Transaction ID: SA11AI.27238

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Daniel C. Guachione

Mailing Address 19 Tania Drive

City State Zip Code
Manchester CT 06040

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

Name of Employer Self-employed Occupation Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼
Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26265

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 11 Birchwood Drive

City State Zip Code
Ansonia CT 06401

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

Name of Employer Halloran & Sage LLP Occupation Government Relations

Receipt For: 2008
 Primary General
 Other (specify) ▼
Convention

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26255

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 196
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. Bartley Halloran

Mailing Address One Lewis Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Occupation
Self-employed Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26510

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 90 Doctor Nott Road

City State Zip Code
Franklin CT 06254

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

Name of Employer Occupation
General Dynamics Electric Boat Director of Communications

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention **250.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11AI.26479

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 200 Bloomfield Avenue

City State Zip Code
Hartford CT 06117

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

Name of Employer Occupation
University of Hartford President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention **1000.00**

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26384

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Guy T. Hatch		Date of Receipt
	Mailing Address 60 Westwood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 01 / 2008
	City	State	Zip Code
	Vernon	CT	06066
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.26402
		Amount of Each Receipt this Period	
		<input type="text"/> 250.00	
Name of Employer On Site Gas Systems, Inc.		Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) ▼ Convention		
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) Susan Hays		Date of Receipt
	Mailing Address 104 Oakwood Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 01 / 2008
	City	State	Zip Code
	West Hartford	CT	06119
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.26417
		Amount of Each Receipt this Period	
		<input type="text"/> 500.00	
Name of Employer Updike, Kelly & Spellacy, P.C.		Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) ▼ Convention		
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Mary M. Heslin		Date of Receipt
	Mailing Address 235 Kenyon Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 01 / 2008
	City	State	Zip Code
	Hartford	CT	06105
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.26408
		Amount of Each Receipt this Period	
		<input type="text"/> 250.00	
Name of Employer Self-employed		Occupation Consultant	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input checked="" type="checkbox"/> Other (specify) ▼ Convention		
		<input type="text"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 196
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 26 Riverview Street

City State Zip Code
Essex CT 06426

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

Name of Employer Occupation
Noble Power Engineer

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 05 / 2008

Transaction ID: SA11AI.26538

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
I. Bradley Hoffman

Mailing Address Connecticut Boulevard

City State Zip Code
East Hartford CT 06108

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

Name of Employer Occupation
Hoffman Enterprises Executive

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26361

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Jeffrey S. Hoffman

Mailing Address Connecticut Boulevard

City State Zip Code
East Hartford CT 06108

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

Name of Employer Occupation
Hoffman Enterprises Executive

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26409

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) **3000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ross H. Hollander

Mailing Address 3 High Ledge Road

City State Zip Code
Bloomfield CT 06002

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

Name of Employer
Hartford Distributors

Occupation
Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4500.00

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26316

Amount of Each Receipt this Period

2000.00

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

B.

Full Name (Last, First, Middle Initial)
James D. Horwitz

Mailing Address 24 Oak Hill Lane

City State Zip Code
Woodbridge CT 06525

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

Name of Employer
Koskoff, Koskoff & Bieder,
P.C.

Occupation
Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2300.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.27161

Amount of Each Receipt this Period

2300.00

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

C.

Full Name (Last, First, Middle Initial)
Allan Hutensky

Mailing Address 100 Constitution Plaza

City State Zip Code
Hartford CT 06103

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

Name of Employer
The Hutensky Group

Occupation
Real Estate Fund Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: SA11AI.26829

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional)

4800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Gwendolyn Smith Iloani

Mailing Address **242 Trumbull Street**

City **Hartford** State **CT** Zip Code **06103**

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

Name of Employer **Smith Whiley & Co.** Occupation **CEO**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **1000.00**

Date of Receipt **06 / 30 / 2008**
Transaction ID: SA11AI.27274
 Amount of Each Receipt this Period **1000.00**

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

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

Mailing Address **15 Quarry Road**

City **Simsbury** State **CT** Zip Code **06070**

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

Name of Employer **BKM Total Office** Occupation **Marketing**

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ **250.00**

Date of Receipt **05 / 02 / 2008**
Transaction ID: SA11AI.26294
 Amount of Each Receipt this Period **250.00**

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

C. Full Name (Last, First, Middle Initial)
John David Jessep

Mailing Address **1 Beck Road**

City **Redding** State **CT** Zip Code **06896**

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

Name of Employer **Koskoff, Koskoff & Bieder** Occupation **Attorney**

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **300.00**

Date of Receipt **06 / 16 / 2008**
Transaction ID: SA11AI.27166
 Amount of Each Receipt this Period **300.00**

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

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Craig M. Jordan
Mailing Address 100 McGrath Road
City South Windsor State CT Zip Code 06074
FEC ID number of contributing federal political committee. **C**
Name of Employer Connecticut Junior Republic Occupation Education Coordinator
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard M. Kaelin
Mailing Address 13211 Dodie Drive
City Darnestown State MD Zip Code 20878
FEC ID number of contributing federal political committee. **C**
Name of Employer PMA Group Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify)
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peter G. Kelly
Mailing Address 1 State Street
City Hartford State CT Zip Code 06013
FEC ID number of contributing federal political committee. **C**
Name of Employer Updike, Kelly & Spellacy, P.C. Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) **1500.00**
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Susan R. Kelly

Mailing Address 29 High Point Road

City State Zip Code
Middle Haddam CT 06456

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

Name of Employer None Occupation None

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26317

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Brendan J. Kennedy

Mailing Address 139 Hazelmere Road

City State Zip Code
New Britain CT 06053

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

Name of Employer Camillieri, Cloud & Kennedy, L Occupation Consultant/Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **500.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26284

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Robert J. Kennedy Jr.

Mailing Address 66 Meadow Lane

City State Zip Code
West Hartford CT 06107

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

Name of Employer CT Assoc. of Realtors Occupation Association Manager

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26501

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) **1000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

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

Mailing Address 95 Scarborough Street

City State Zip Code
Hartford CT 06105

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

Name of Employer
Nat'l Comm. Assoc. for Pr-
eserv
Occupation
President

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼

250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26264

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Lt. Gen. Wm. M. Keys

Mailing Address P.O. Box 364

City State Zip Code
Hume VA 22639

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

Name of Employer
Retired
Occupation
Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼

1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26225

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Stephen R. Kinney

Mailing Address 20 Cromwell Place

City State Zip Code
Old Saybrook CT 06475

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

Name of Employer
Gaffney, Bennett
Occupation
Government Relations

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼

1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26274

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 96 Orchard Hill Drive

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Occupation
D'Esopo Funeral Chapel Funeral Director

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26370

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
John V. Kolenda

Mailing Address 227 North Road

City State Zip Code
Harwinton CT 06791

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

Name of Employer Occupation
iCare Health Management Nursing Hoime Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26485

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 1138 N. Jackson Street

City State Zip Code
Arlington VA 22201

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

Name of Employer Occupation
PMA Group Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.27478

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 53 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joshua D. Koskoff
 Mailing Address 350 Fairfield Avenue
 City State Zip Code
 Bridgeport CT 06604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Koskoff, Koskoff & Bieder Attorney
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 6 / 2 0 0 8
Transaction ID: SA11AI.27164
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Michael P. Koskoff
 Mailing Address 350 Fairfield Avenue
 City State Zip Code
 Bridgeport CT 06604
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Koskoff, Koskoff & Bieder Attorney
 PC
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 6 / 2 0 0 8
Transaction ID: SA11AI.27169
 Amount of Each Receipt this Period
 2300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
David J. Kozak
 Mailing Address 31 Hunter's Ridge
 City State Zip Code
 Rocky Hill CT 06067
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Data Mail Executive
 Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention 2000.00
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8
Transaction ID: SA11AI.26312
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3800.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Edward D. Kratovil

Mailing Address 2 Dearfield Dr.

City State Zip Code
Greenwich CT 06831

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

Name of Employer Occupation
UST Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 27 / 2008

Transaction ID: SA11AI.26721

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
John C. Larkin

Mailing Address 18 Grist Mill Road

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation
J L Larkin Company Lobbyist/Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26399

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 18 Grist Mill Road

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation
J L Larkin Company Lobbyist/Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 29 / 2008

Transaction ID: SA11AI.26644

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jean M. Lavecchia
Mailing Address 10 Wellsweep Lane

City State Zip Code
Killingworth CT 06417

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

Name of Employer Occupation
Northeast Utilities Vice President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 13 / 2008

Transaction ID: SA11AI.26577

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Charles H. Lenore
Mailing Address 37 Porter Drive

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
Day Pitney LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.27259

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
H. Craig LeRoy
Mailing Address 1037 Copper Hill Road

City State Zip Code
West Suffield CT 06039

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

Name of Employer Occupation
Roy & LeRoy Government Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 16 / 2008

Transaction ID: SA11AI.27149

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 40 Hungerford Street

City State Zip Code
Hartford CT 06106

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

Name of Employer Occupation
Levin, Powers, Brennan & Shea LLC Government Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.27297

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Marc S. Levine

Mailing Address 30 Fawn Brook Drive

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
Mark S. Levine Real Estate Interests Principal

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26396

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Coleman B. Levy

Mailing Address 74 Batterson Park Road

City State Zip Code
Farmington CT 06032

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

Name of Employer Occupation
Levy & Droney, P.C. Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11AI.27210

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Joel H. Lichtenstein

Mailing Address 350 Fairfield Avenue

City State Zip Code
Bridgeport CT 06604

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

Name of Employer Occupation
Koskoff, Koskoff & Bieder, P.C. Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 16 / 2008

Transaction ID: SA11AI.27160

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Linda M. Linehan

Mailing Address 184 Valley View Court

City State Zip Code
Southington CT 06489

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

Name of Employer Occupation
None None

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.27097

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 25 Linnard Road

City State Zip Code
West Hartford CT 06107

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

Name of Employer Occupation
Halloran & Sage, LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26236

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 196
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Bill Lowe</p> <p>Mailing Address 7 Joshua Drive</p> <p>City State Zip Code West Simsbury CT 06092</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation ING Management</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 02 / 2008</p> <p>Transaction ID: SA11AI.26835</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Jack Lucas</p> <p>Mailing Address 75 Laurel Grove Dr.</p> <p>City State Zip Code Higganum CT 06441</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Halloran & Sage Attorney</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention 250.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 02 / 2008</p> <p>Transaction ID: SA11AI.26246</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) Bruce Ludemann</p> <p>Mailing Address 41 Abrams Road</p> <p>City State Zip Code Cheshire CT 06410</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Fuel Cell Energy, Inc. Senior VP - Sales & Mark.</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention 250.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 02 / 2008</p> <p>Transaction ID: SA11AI.26374</p> <p>Amount of Each Receipt this Period 250.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>1500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 12769 Quarterhouse Lane

City State Zip Code
Woodbridge VA 22192

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

Name of Employer Occupation
PMA Group Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
1500.00

Transaction ID: SA11AI.27485

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

B. Full Name (Last, First, Middle Initial)
Kenneth W. MacCormac

Mailing Address 26 Walbridge Road

City State Zip Code
West Hartford CT 06119

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

Name of Employer Occupation
Capewell Components Co. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Amount of Each Receipt this Period
250.00

Transaction ID: SA11AI.26346

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

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

Mailing Address 165 Ingham Hill Road

City State Zip Code
Old Saybrook CT 06457

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

Name of Employer Occupation
Cross Sound Ferries, Inc. Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2000.00

Transaction ID: SA11AI.27296

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

SUBTOTAL of Receipts This Page (optional) ► **3750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 5115 Donovan Drive

City State Zip Code
Alexandria VA 22304

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

Name of Employer: Women's Business Enterprise Nat. Council
Occupation: Director of Field Operations

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: SA11AI.26584
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Mark J. Magliocchetti

Mailing Address 10203 Woodvale Pond Drive

City State Zip Code
Fairfax Station VA 22039

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

Name of Employer: Paul Magliocchetti Associates
Occupation: Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: SA11AI.26585
 Amount of Each Receipt this Period: 850.00

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

C. Full Name (Last, First, Middle Initial)
Paul J. Magliocchetti

Mailing Address 1101 S. Arlington Ridge Road

City State Zip Code
Arlington VA 22202

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

Name of Employer: The PMA Group, Inc.
Occupation: Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: SA11AI.27474
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 61 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 200 Glen Parkway

City Hamden State CT Zip Code 06517

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

Name of Employer Halloran & Sage LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 500.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26238
 Amount of Each Receipt this Period 500.00

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

B. Full Name (Last, First, Middle Initial)
Edwin J. Maley Jr.

Mailing Address 4 Shawnee CT

City Cromwell State CT Zip Code 06416

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

Name of Employer State of Connecticut/Maley Law Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 1000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26500
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 20 Devine Road

City Suffield State CT Zip Code 06078

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

Name of Employer The Phoenix Companies, Inc. Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 1000.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26216
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **2500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 196
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Bruce A. Mandell</p> <p>Mailing Address 240 Hartford Avenue</p> <p>City State Zip Code Newington CT 06111</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Data Mail Occupation Vice President - Operations</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention</p> <p style="text-align: right;">Election Cycle-to-Date 1000.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 02 / 2008</p> <p>Transaction ID: SA11AI.26309</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p>B. Full Name (Last, First, Middle Initial) ALex Marcellino</p> <p>Mailing Address 87 Davis Road</p> <p>City State Zip Code Storrs CT 06268</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer City of Hartford Occupation Dep. Dir. of Public Works</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p style="text-align: right;">Election Cycle-to-Date 500.00</p>	<p>Date of Receipt MM / DD / YYYY 06 / 30 / 2008</p> <p>Transaction ID: SA11AI.27278</p> <p>Amount of Each Receipt this Period 500.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Lillian B. Marlow</p> <p>Mailing Address 51 Blue Ridge Drive</p> <p>City State Zip Code Manchester CT 06040</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation None</p> <p>Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p style="text-align: right;">Election Cycle-to-Date 400.00</p>	<p>Date of Receipt MM / DD / YYYY 05 / 28 / 2008</p> <p>Transaction ID: SA11AI.26677</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	1550.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Robert J. Martino		Date of Receipt
	Mailing Address One State Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Hartford	CT	06103
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26215
Name of Employer Updike, Kelly & Spellacy, P.C.		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Convention		Election Cycle-to-Date <input type="text"/>	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Jamshid Marvasti		Date of Receipt
	Mailing Address 63 E. Center Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 1 / 2 0 0 8
	City	State	Zip Code
	Manchester	CT	06040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26356
Name of Employer Self-employed		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Convention		Election Cycle-to-Date <input type="text"/>	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Jamshid Marvasti		Date of Receipt
	Mailing Address 63 E. Center Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 7 / 2 0 0 8
	City	State	Zip Code
	Manchester	CT	06040
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26736
Name of Employer Self-employed		Occupation Physician	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="text"/> Convention		Election Cycle-to-Date <input type="text"/>	<input type="text"/> 100.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 600.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Shaun P. Mathews

Mailing Address 19 Brook Drive

City State Zip Code
Simsbury CT 06070

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

Name of Employer Occupation
ING Financial Service Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.27086

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Daniel S. Matos

Mailing Address 185 Asylum Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Occupation
Day, Berry & Howard, LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26341

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
James R. McCavanaugh

Mailing Address 237 E. Center Street

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
Self-employed Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26340

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **3550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Patience McDowell		Date of Receipt
	Mailing Address 45 Woodside Circle		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Hartford	CT	06105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26273
Name of Employer Self-employed		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 500.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) William J. McGrath Jr.		Date of Receipt
	Mailing Address 15 Grace Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Portland	CT	06480
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26222
Name of Employer Halloran & Sage, LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 800.00
<input type="checkbox"/> Primary <input type="checkbox"/> General			
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) William J. McGrath Jr.		Date of Receipt
	Mailing Address 15 Grace Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Portland	CT	06480
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26223
Name of Employer Halloran & Sage, LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 1200.00
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 196
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) David R. McHale		Date of Receipt
	Mailing Address 3 Watch Hill Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 1 3 / 2 0 0 8
	City	State	Zip Code
	West Simsbury	CT	06092
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26578
Name of Employer Northeast Utilities		Occupation Senior Vice President - CFO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Thomas J. McInerney		Date of Receipt
	Mailing Address 12 Brownstone Turn		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 8 / 2 0 0 8
	City	State	Zip Code
	Weatogue	CT	06089
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26554
Name of Employer ING		Occupation Chairman - Insurance	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2425.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) David J. McQuade		Date of Receipt
	Mailing Address 140 Hawthorne Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Hartford	CT	06105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26296
Name of Employer Murtha Cullina LLP		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention		Election Cycle-to-Date ▼	<input type="text"/> 1500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3300.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Diane R. Mellen

Mailing Address 30 Shady Lane

City State Zip Code
Monroe CT 06468

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

Name of Employer Occupation
ING Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.27089

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Alfred P. Meyer

Mailing Address 34 Notch Road

City State Zip Code
West Simsbury CT 06092

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

Name of Employer Occupation
Infinity Fuel & Hydrogen, Inc. Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26347

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Stanley W. Mickus

Mailing Address 12 Hinckley Street

City State Zip Code
Mystic CT 06355

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

Name of Employer Occupation
Cross Sound Ferry Principal

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.27298

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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

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

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

FOR LINE NUMBER: PAGE 68 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 191 Reverknolls

City Avon State CT Zip Code 06001

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

Name of Employer HJA Realty LLC Occupation Business Owner

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 250.00

Date of Receipt 05 / 01 / 2008
Transaction ID: SA11AI.26420
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 1137 Silas Deane Hwy.

City Wethersfield State CT Zip Code 06109

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

Name of Employer Close, Jensen & Miller Occupation Surveyor/Engineer

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 1150.00

Date of Receipt 05 / 01 / 2008
Transaction ID: SA11AI.26414
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
John J. Mitchell

Mailing Address 40 Windy Hill Drive

City South Windsor State CT Zip Code 06074

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

Name of Employer Mitchell Fuel Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) Convention

Election Cycle-to-Date 500.00

Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26488
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Margaret L. Morton

Mailing Address 369 Pine Street

City Middletown State CT Zip Code 06457

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

Name of Employer Northeast Utilities Occupation Vice President - Govt. Affairs

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 05 / 13 / 2008
Transaction ID: SA11AI.26571
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 21 Temple Street

City Hartford State CT Zip Code 06103

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

Name of Employer MotleyBeup, LLP Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼ Convention

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 27 / 2008
Transaction ID: SA11AI.26545
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 21 Temple Street

City Hartford State CT Zip Code 06103

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

Name of Employer MotleyBeup, LLP Occupation Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 06 / 02 / 2008
Transaction ID: SA11AI.26790
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Richard T. Mulready		Date of Receipt
	Mailing Address 38 Linnard Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 02 / 2008
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26393
Name of Employer Servus Management Corpora-tion		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Kathleen A. Murphy		Date of Receipt
	Mailing Address 72 Kingswood Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 15 / 2008
	City	State	Zip Code
	So. Glastonbury	CT	06073
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26581
Name of Employer ING		Occupation CEO, US Wealth Management	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Colette Nakhoul		Date of Receipt
	Mailing Address 8 Farmington Meadow		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 23 / 2008
	City	State	Zip Code
	Farmington	CT	06032
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27235
Name of Employer Smith Whiley & Company		Occupation Portfolio Manager/CFO	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3800.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Denise L. Nappier

Mailing Address 110 Westerly Terrace

City State Zip Code
Hartford CT 06105

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

Name of Employer State of Connecticut Occupation Treasurer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11AI.27254

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Kathleen L. Nastro

Mailing Address 554 Buck CT

City State Zip Code
Cheshire CT 06410

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

Name of Employer Koskoff, Koskoff & Bieder Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.27158

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Raymond P. Necci

Mailing Address 398 Tall Timbers Road

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Northeast Utilities Occupation President & COO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 13 / 2008

Transaction ID: SA11AI.26567

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Matthew L. Nemerson

Mailing Address 36 Huntington Street

City State Zip Code
New Haven CT 06511

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

Name of Employer Occupation
CT Technology Council President & CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26508

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Leon J. Olivier

Mailing Address 111-2 Shore Road

City State Zip Code
Old Lyme CT 06371

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

Name of Employer Occupation
Northeast Utilities Executive Vice Pres. - Operations

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2008

Transaction ID: SA11AI.26575

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
Richard F. Orr

Mailing Address 49 Lexington Avenue

City State Zip Code
West Hartford CT 06119

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

Name of Employer Occupation
BL Companies Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26418

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Nancy Clinton Parker		Date of Receipt
	Mailing Address 518 Prospect Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 02 / 2008
	City	State	Zip Code
	Hartford	CT	06105
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26766
Name of Employer None		Occupation None	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) D. A. Patch		Date of Receipt
	Mailing Address 210 Regan Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 01 / 2008
	City	State	Zip Code
	Vernon	CT	06066
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26364
Name of Employer RSL Fiber Systems		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Peyton Patterson		Date of Receipt
	Mailing Address 6 Opening Hill Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 02 / 2008
	City	State	Zip Code
	Madison	CT	06443
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26487
Name of Employer New Alliance Bank		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Convention		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
William R. Peele Jr.
Mailing Address 32 Orchard Road
City State Zip Code
West Hartford CT 06117
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
ING Executive
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
500.00
Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2008
Transaction ID: SA11AI.27087
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas L. Phillips
Mailing Address 505 Weir Street
City State Zip Code
Glastonbury CT 06033
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Capital Work Force Partners President and CEO
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Convention
450.00
Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008
Transaction ID: SA11AI.26493
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Michael G. Polo
Mailing Address 369 Progress Drive
City State Zip Code
Manchester CT 06042
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
AdChem Mfg. Tech., Inc Owner
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Convention
1000.00
Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008
Transaction ID: SA11AI.26228
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1750.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 75 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Paul S. Polo

Mailing Address 369 Progress Drive

City State Zip Code
Manchester CT 06042

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

Name of Employer Occupation
AdChem Mfg. Tech., Inc. Sales/Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26229

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Michael J. Prucker

Mailing Address 801 Pennsylvania Avenue, NW

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation
Palmetto Group Government Relations

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26383

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Kenneth L. Przybysz

Mailing Address 50 Goodwin Circle

City State Zip Code
Hartford CT 06105

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

Name of Employer Occupation
KLP, LLC Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26492

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John L. Pugliese
Mailing Address 2346 Captain Kidd Road
City State Zip Code
Fernandina Beach FL 32034
FEC ID number of contributing federal political committee. **C**
Name of Employer PMA Group Occupation Consultant
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.27476
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John R. Rathgeber
Mailing Address 98 Mooreland Road
City State Zip Code
Kensington CT 06037
FEC ID number of contributing federal political committee. **C**
Name of Employer CBIA Occupation President
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ Convention 250.00
Date of Receipt 05 / 01 / 2008
Transaction ID: SA11AI.26368
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Kenneth Reels
Mailing Address P.O. Box 339
City State Zip Code
Ledyard CT 06339
FEC ID number of contributing federal political committee. **C**
Name of Employer Mashantucket Pequot Tribal Council Occupation Tribal Chairman
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ Convention 1000.00
Date of Receipt 05 / 05 / 2008
Transaction ID: SA11AI.26524
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2250.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 77 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Linda L. Reuber
Mailing Address 77 Francis Drive
City State Zip Code
Glastonbury CT 06033
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Self-employed Designer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention 500.00
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8
Transaction ID: SA11AI.26404
Amount of Each Receipt this Period
500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kevin N. Reynolds
Mailing Address 280 Steele Road
City State Zip Code
West Hartford CT 06117
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Updike, Kelly & Spellacy, P.C. Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention 250.00
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8
Transaction ID: SA11AI.26298
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Christopher D. Riley
Mailing Address 15 Winthrop Hill Road
City State Zip Code
Ivoryton CT 06442
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Citizens Bank Director, Public Affairs
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention 250.00
Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8
Transaction ID: SA11AI.26313
Amount of Each Receipt this Period
250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christina B. Ripple

Mailing Address 105 Scarborough Street

City State Zip Code
Hartford CT 06105

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.27205

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 16 Thatcher Terrace

City State Zip Code
Farmington CT 06032

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

Name of Employer Northeast Utilities Occupation Senior Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.26572

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 17 Glenn Hollow Lane

City State Zip Code
West Simsbury CT 06092

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

Name of Employer ING Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

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

Transaction ID: SA11AI.26831

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 79 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
David C. Robinson

Mailing Address 21 Ledyard Road

City State Zip Code
West hartford CT 06117

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

Name of Employer Occupation
The Hartford Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention 750.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26211

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Kevin M. Roche

Mailing Address 1651 Asylum Avenue

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention 750.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26243

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Sabino Rodriguez III

Mailing Address 12 Norwalk Avenue

City State Zip Code
Westport CT 06880

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

Name of Employer Occupation
Day Pitney LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.27263

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Doug Rose

Mailing Address 443 Simsbury Road

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
Aero Gear Inc. CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26419

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Steven H. Rosenberg

Mailing Address 61 Country Lane

City State Zip Code
Bethany CT 06524

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

Name of Employer Occupation
Saint Francis Hosp. and MedCen Hospital Administrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26478

Amount of Each Receipt this Period
100.00

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

C.

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

Mailing Address 249 Pearl Street

City State Zip Code
Hartford CT 06103

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

Name of Employer Occupation
Max Restaurant Group President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26315

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Steven P. Rosenthal

Mailing Address 40 Bartlett Street

City State Zip Code
Marblehead MA 01945

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

Name of Employer Occupation
Northland Investment CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26270

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Steven P. Rosenthal

Mailing Address 40 Bartlett Street

City State Zip Code
Marblehead MA 01945

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

Name of Employer Occupation
Northland Investment CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26272

Amount of Each Receipt this Period
2300.00

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

C. Full Name (Last, First, Middle Initial)
Marshall S. Ruben

Mailing Address 10 North Branford Road

City State Zip Code
Wallingford CT 06492

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

Name of Employer Occupation
Ruben, Johnson & Morgan P.C. Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.26290

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 82 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Warren C. Rupparr

Mailing Address 216 North Quaker Lane

City State Zip Code
West Hartford CT 06119

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

Name of Employer
Independent Ins. Agents of CT
Occupation
President

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **1125.00**

Date of Receipt
MM / DD / YYYY
05 / 09 / 2008

Transaction ID: SA11AI.26556

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Patricia Marie Russo

Mailing Address 191 Smith Ridge Road

City State Zip Code
New Canaan CT 06840

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

Name of Employer
None
Occupation
None

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **2000.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26486

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Daniel R. Sabia

Mailing Address 259 Grandview Drive

City State Zip Code
Glastonbury CT 06033

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

Name of Employer
BKM
Occupation
President

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26301

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) **1750.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Indian Tribe Saginaw Chippewa
Mailing Address 7070 E. Broadway

City State Zip Code
Mt. Pleasant MI 48858

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

Name of Employer N/A Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 02 / 2008

Transaction ID: SA11AI.26839

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Chittaranjan Sahay
Mailing Address 170 East Opal Drive

City State Zip Code
Glastonbury CT 06033

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

Name of Employer University of Hartford Occupation Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 05 / 2008

Transaction ID: SA11AI.26543

Amount of Each Receipt this Period
150.00

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

C. Full Name (Last, First, Middle Initial)
Adam P. Salina
Mailing Address 167 Spicewood Lane

City State Zip Code
Kensington CT 06037

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

Name of Employer Town of Berlin Occupation Elected Official

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2008

Transaction ID: SA11AI.26227

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► 2650.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 84 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Maricopa Indians Salt River Pima

Mailing Address 10005 E Osborn Road

City State Zip Code
Scottsdale AZ 85256

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation N/A

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 05 / 27 / 2008

Transaction ID: SA11AI.26743

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Renee Samuels

Mailing Address 46 Balfour Drive

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation None

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 05 / 02 / 2008

Transaction ID: SA11AI.26276

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Robert T. Samuels

Mailing Address 46 Balfour Drive

City State Zip Code
West Hartford CT 06117

FEC ID number of contributing federal political committee. C

Name of Employer ABS Development Company Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 05 / 02 / 2008

Transaction ID: SA11AI.26275

Amount of Each Receipt this Period 2000.00

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

SUBTOTAL of Receipts This Page (optional) 4000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 85 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James P. Sandler
Mailing Address P.O. Box 231336

City State Zip Code
Hartford CT 06123

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

Name of Employer Sandler, Hatcher & Goldstein, P.C. Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **500.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26283
Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Lawrence G. Santilli
Mailing Address 534 West Morris Road

City State Zip Code
Morris CT 06763

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

Name of Employer Athena Health Care Systems Occupation President
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **1100.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26505
Amount of Each Receipt this Period
1100.00

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

C. Full Name (Last, First, Middle Initial)
Martin J. Sbriglio
Mailing Address 329 Isinglass Road

City State Zip Code
Shelton CT 06485

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

Name of Employer Self-employed Occupation Business
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ Convention **1000.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26218
Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 / 196
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Daniel P. Scapellati	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 225 Asylum Street	Transaction ID: SA11AI.26248
	City State Zip Code Hartford CT 06103	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Halloran & Sage LLP Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) Mark E. Scheinberg	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 345 Buckland Hills Drive	Transaction ID: SA11AI.26209
	City State Zip Code Manchester CT 06040	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Data Institute, Inc. Educational Administrator	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2300.00	

C.	Full Name (Last, First, Middle Initial) Mark E. Scheinberg	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 345 Buckland Hills Drive	Transaction ID: SA11AI.26210
	City State Zip Code Manchester CT 06040	Amount of Each Receipt this Period 1700.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Data Institute, Inc. Educational Administrator	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 64 Higley Road

City State Zip Code
West Granby CT 06090

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

Name of Employer Schupp & Grochmal, LLC Occupation Investment Banker

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26302

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Edmund M. See

Mailing Address 134 Westerly Terrace

City State Zip Code
Hartford CT 06105

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 16 / 2008

Transaction ID: SA11AI.27157

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Rose Alma Senatore

Mailing Address 85 North Main Street

City State Zip Code
East Hampton CT 06424

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

Name of Employer Catholic Charities Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26490

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 196

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Sara R. Shapiro

Mailing Address One Cedar Chase

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26398

Amount of Each Receipt this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
Robert F. Shea, Jr.

Mailing Address 57 Ballard Drive

City State Zip Code
West Hartford CT 06119

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

Name of Employer Occupation
Gaffney Bennett & Associates Government Relations

Receipt For: 2008
 Primary General
 Other (specify)

Election Cycle-to-Date **1050.00**

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.27093

Amount of Each Receipt this Period

50.00

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

C.

Full Name (Last, First, Middle Initial)
Robert F. Shea, Jr.

Mailing Address 57 Ballard Drive

City State Zip Code
West Hartford CT 06119

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

Name of Employer Occupation
Gaffney Bennett & Associates Government Relations

Receipt For: 2008
 Primary General
 Other (specify)

Election Cycle-to-Date **1150.00**

Date of Receipt

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

Transaction ID: SA11AI.26774

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional)

400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Robert F. Shea, Jr.

Mailing Address 57 Ballard Drive

City State Zip Code
West Hartford CT 06119

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Gaffney Bennett & Associates Government Relations

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 10 / 2008

Transaction ID: SA11AI.27094

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
Michael P. Shea

Mailing Address 325 N. Quaker Lane

City State Zip Code
West Hartford CT 06119

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Day Pitney LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11AI.27276

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Charles P. Sheehan

Mailing Address 32 Windbrook Drive

City State Zip Code
Suffield CT 06078

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Metropolitan District Comm. Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼
Convention

250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 02 / 2008

Transaction ID: SA11AI.26278

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Eugene A. Sheehan, III

Mailing Address 511 E. Carriage Drive

City State Zip Code
Glastonbury CT 06037

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

Name of Employer Occupation
Sullivan & Leshane Public Relations Executive

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention 1000.00

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26253

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Ann E. Sheffer

Mailing Address 19 Stony Point Road

City State Zip Code
Westport CT 06880

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

Name of Employer Occupation
None None

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention 2000.00

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26385

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
David M. Sheridan

Mailing Address 24 Yale Drive

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
Leby & Droney, P.C. Attorney

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention 800.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11AI.26701

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) **3000.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Thomas P. Sheridan

Mailing Address 33 Brookview Drive

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation
Dwyer, Sheridan & Fitzgerald Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26208

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 200 Nutmeg Lane

City State Zip Code
East Hartford CT 06118

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

Name of Employer Occupation
Community Health Services, Inc CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26496

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Charles W. Shivery

Mailing Address 3 Garnet Hill Lane

City State Zip Code
Avon CT 06001

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

Name of Employer Occupation
Northeast Utilities Chairman, President & CEO

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 13 / 2008

Transaction ID: SA11AI.26574

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 92 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James Sicilian
Mailing Address 59 Berwyn Road
City West Hartford State CT Zip Code 06107
FEC ID number of contributing federal political committee. **C**
Name of Employer Day Pitney LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.27280
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Robert G. Siegel
Mailing Address 138 Beacon Hill Drive
City West Hartford State CT Zip Code 06117
FEC ID number of contributing federal political committee. **C**
Name of Employer Day Pitney LLP Occupation Attorney
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 06 / 30 / 2008
Transaction ID: SA11AI.27265
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert A. Simons
Mailing Address 433 South Main Street
City West Hartford State CT Zip Code 06110
FEC ID number of contributing federal political committee. **C**
Name of Employer Simons & Steinberg Interests Occupation Real Estate
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) Convention 2000.00
Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26207
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
John J. Smith
 Mailing Address 54 High Meadow Lane
 City Middlefield State CT Zip Code 06455
 Date of Receipt 05 / 15 / 2008
Transaction ID: SA11AI.27484
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Information Requested Occupation Information Requested
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William F. Smith
 Mailing Address 478 Halladay Avenue
 City Suffield State CT Zip Code 06078
 Date of Receipt 05 / 01 / 2008
Transaction ID: SA11AI.26344
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Robinson & Cole Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ Convention 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James V. Somers
 Mailing Address 71 Blue Ridge Drive
 City Simsbury State CT Zip Code 06070
 Date of Receipt 05 / 02 / 2008
Transaction ID: SA11AI.26252
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Halloran & Sage Occupation Attorney
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ Convention 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 94 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 26 Rockwood Drive

City State Zip Code
Portland CT 06480

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

Name of Employer Occupation
iCare Management, LLC Nursing Home Adminstrator

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Convention

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26482

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Felix J. Springer

Mailing Address 60 Stoner Drive

City State Zip Code
West Hartford CT 06107

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

Name of Employer Occupation
Day Pitney LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.27269

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 192 Knollwood Road

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
Carla's Pasta, Inc. President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.27245

Amount of Each Receipt this Period
60.00

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

SUBTOTAL of Receipts This Page (optional) ► **560.00**

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

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

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

FOR LINE NUMBER: PAGE 95 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jesse Stratton
 Mailing Address 94 Goodwin Circle
 City State Zip Code
 Hartford CT 06105
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 5 / 2 0 0 8
Transaction ID: SA11AI.26540
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Stratton Resources, LLC Occupation Consultant/Lobbyist
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lloyd B. Sugarman
 Mailing Address 87 Hoffman Avenue
 City State Zip Code
 Cranston RI 02920
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 2 / 2 0 0 8
Transaction ID: SA11AI.26507
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Johnny Rockets Occupation President
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Eugene F. Sullivan
 Mailing Address 214 Kenswick Lane
 City State Zip Code
 Windsor CT 06095
 Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 5 / 2 0 0 8
Transaction ID: SA11AI.26516
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer R & D dynamics Corporation Occupation Business Manager
 Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) Convention
 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 96 / 196

(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
William J. Sweeney, Jr.

Mailing Address 7 Foxcroft Road

City State Zip Code
West Hartford CT 06119

FEC ID number of contributing federal political committee. C

Name of Employer Sweeney & Griffen Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date 250.00

Date of Receipt 05 / 02 / 2008

Transaction ID: SA11AI.26506

Amount of Each Receipt this Period 250.00

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

B.

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

Mailing Address 87 Alexandra Drive

City State Zip Code
Stamford CT 06903

FEC ID number of contributing federal political committee. C

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt 06 / 30 / 2008

Transaction ID: SA11AI.27267

Amount of Each Receipt this Period 500.00

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

C.

Full Name (Last, First, Middle Initial)
James J. Szerejko

Mailing Address 15 Thicket Lane

City State Zip Code
West Hartford CT 06107

FEC ID number of contributing federal political committee. C

Name of Employer Halloran & Sage LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date 250.00

Date of Receipt 05 / 02 / 2008

Transaction ID: SA11AI.26249

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
James J. Tancredi

Mailing Address 69 Northington Drive

City Avon State CT Zip Code 06001

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.27257
 Amount of Each Receipt this Period: 500.00

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

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

Mailing Address 238 Whitney Street

City Hartford State CT Zip Code 06105

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 16 / 2008
Transaction ID: SA11AI.27170
 Amount of Each Receipt this Period: 1500.00

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

C. Full Name (Last, First, Middle Initial)
Alvin E. Taylor

Mailing Address 15 Regency Drive

City Bloomfield State CT Zip Code 06002

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼

Date of Receipt: 05 / 02 / 2008
Transaction ID: SA11AI.26259
 Amount of Each Receipt this Period: 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 196
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Robert M. Taylor III		Date of Receipt
	Mailing Address 7 Clover Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Weatogue	CT	06089
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27200
Name of Employer Day Pitney LLP		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 500.00	<input type="text"/> 500.00
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) DeRoy C. Thomas		Date of Receipt
	Mailing Address 141 Stoner Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.26335
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/> 500.00	<input type="text"/> 500.00
<input checked="" type="checkbox"/> Other (specify) ▼ Convention			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) DeRoy C. Thomas		Date of Receipt
	Mailing Address 141 Stoner Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	West Hartford	CT	06107
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.27244
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text"/> 560.00	<input type="text"/> 60.00
<input type="checkbox"/> Other (specify) ▼			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1060.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Giovanni P. Tomasi

Mailing Address 19 Zeya Drive

City State Zip Code
Coventry CT 06238

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

Name of Employer RSL Fiber Systems, LLC Occupation CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26410

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Angelo Tomasso Jr.

Mailing Address 132 Roslyn Drive

City State Zip Code
New Britain CT 06052

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

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼
 Convention

Election Cycle-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.26405

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
James H. Totondo

Mailing Address 26 Fulton Place

City State Zip Code
West Hartford CT 06107

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.27261

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Charles Veley	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address 222 North Beacon Street	Transaction ID: SA11AI.26299
	City State Zip Code Hartford CT 06105	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer United Technologies	Occupation Director, Global Real Estate	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

B.	Full Name (Last, First, Middle Initial) Richard W. Vicino	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 167 Fox Hill Drive	Transaction ID: SA11AI.26386
	City State Zip Code Rocky Hill CT 06067	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-employed	Occupation Development/Construction Mgmt.	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) John Votto	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 633 Tudor Drive	Transaction ID: SA11AI.26337
	City State Zip Code Cheshire CT 06410	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Hospital for Special Care	Occupation Hospital CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2200.00	

SUBTOTAL of Receipts This Page (optional)	700.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 / 196
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) John Votto	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 633 Tudor Drive	Transaction ID: SA11AI.26338
	City State Zip Code Cheshire CT 06410	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Hospital for Special Care Hospital CEO	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) William J. Wade Jr.	Date of Receipt MM / DD / YYYY 06 / 30 / 2008
	Mailing Address 100 Wells Street	Transaction ID: SA11AI.27292
	City State Zip Code Hartford CT 06103	Amount of Each Receipt this Period 240.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Capital Burner Principal	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Jon C. Walker	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 726 Tarpon Avenue	Transaction ID: SA11AI.27472
	City State Zip Code Fernandina Beach FL 32034	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation PMA Group Consultant	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	1540.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 102 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 34 Hunter Lane

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.27488

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Richard J. Wasserman

Mailing Address 33 Lincoln Road

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Day Pitney LLP Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.27155

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 157 Pitkin Street

City State Zip Code
Manchester CT 06040

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

Name of Employer RE/Max Occupation Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.26752

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 103 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Arnold B. West

Mailing Address 220 Kenyon Street

City State Zip Code
Hartford CT 06105

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

Name of Employer Occupation
ING Investment Management Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 10 / 2008

Transaction ID: SA11AI.27103

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Maureen E. Westbrook

Mailing Address 10 Christina Lane

City State Zip Code
Westbrook CT 06498

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

Name of Employer Occupation
Conn. Water Company Executive

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
Convention

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26289

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Thomas R. Wildman

Mailing Address 324 N. Steele Road

City State Zip Code
West Hartford CT 06117

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

Name of Employer Occupation
Day Pitney LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11AI.27270

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 104 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Patricia M. Williams

Mailing Address 115 Englewood Avenue

City State Zip Code
West Hartford CT 06110

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

Name of Employer Occupation
Hartford Housing Authority Administrator

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 02 / 2008

Transaction ID: SA11AI.26257

Amount of Each Receipt this Period
250.00

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

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

Mailing Address P.O. Box 291

City State Zip Code
Granville MA 01034

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

Name of Employer Occupation
Fuel Cell Energy, Inc. Executive

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **250.00**

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26336

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Christopher S. Wright

Mailing Address 42 Windshire Drive

City State Zip Code
South Windsor CT 06074

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

Name of Employer Occupation
iCare CEO/President

Receipt For: 2008
 Primary General
 Other (specify) **Convention**

Election Cycle-to-Date **750.00**

Date of Receipt
MM / DD / YYYY
05 / 01 / 2008

Transaction ID: SA11AI.26481

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

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

Mailing Address 97 Miner Street

City Middletown State CT Zip Code 06457

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

Name of Employer ING Occupation Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 10 / 2008
Transaction ID: SA11AI.27099
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
John Peter Wronowski

Mailing Address 55 Oakland Drive

City Oakdale State CT Zip Code 06370

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

Name of Employer Cross Sound Ferry Occupation Principal

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.27302
 Amount of Each Receipt this Period: 2300.00

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

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

Mailing Address 55 Oakland Drive

City Oakdale State CT Zip Code 06370

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

Name of Employer Cross Sound Ferry Occupation Principal

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11AI.27300
 Amount of Each Receipt this Period: 2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **5600.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Albert Zakarian

Mailing Address 19 Wyngate

City State Zip Code
Simsbury CT 06070

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

Name of Employer Occupation
Day, Berry & Howard LLP Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2008

Transaction ID: SA11AI.27199

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	192884.50

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

Use separate schedule(s)
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(check only one)

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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address WORLDWIDE HEADQUARTERS

City State Zip Code
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11C.26325

Amount of Each Receipt this Period

5000.00

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

B.

Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COMMITTEE)

Mailing Address 421 AVIATION WAY

City State Zip Code
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C70004585

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 14 / 2008

Transaction ID: SA11C.26592

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COMMITTEE)

Mailing Address 421 AVIATION WAY

City State Zip Code
FREDERICK MD 21701

FEC ID number of contributing federal political committee. **C** C70004585

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 14 / 2008

Transaction ID: SA11C.26594

Amount of Each Receipt this Period

4000.00

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

SUBTOTAL of Receipts This Page (optional) ▶

10000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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 11a 11b 11c 11d
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1625 MASSACHUSETTS AVE, N.W.

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 30 / 2008

Transaction ID: SA11C.27305

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

Mailing Address 9700 West Bryn Mawr Ave.

City State Zip Code
Rosemont IL 60018

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 14 / 2008

Transaction ID: SA11C.26596

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF LIFE INSURANCE, LIFE INSURANCE PAC

Mailing Address 1001 PENNSYLVANIA AVE NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00147066

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11C.27221

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN DENTAL POLITICAL ACTION COMMITTEE

Mailing Address 1111 14TH STREET, NW, 11TH FLOOR

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	5	/	2	0	0	8

Transaction ID: SA11C.26531

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE N W

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	5	/	2	0	0	8

Transaction ID: SA11C.26595

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN PODIATRIC MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 9312 Old Georgetown Road

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	0	/	2	0	0	8

Transaction ID: SA11C.27175

Amount of Each Receipt this Period
1000.00

Redesignation Requested

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

**SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION
Mailing Address 1300 L Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00010322

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11C.27186

Amount of Each Receipt this Period
4000.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC
Mailing Address 1575 I Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11C.27173

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF PENSION PROFESSIONALS & ACTUARIES PAC
Mailing Address 4245 N Fairfax Drive
Suite 750

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00333104

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11C.26589

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

**SCHEDULE A (FEC Form 3)
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 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC POLITICAL ACTION COMMITTEE (AB-PAC)
Mailing Address ONE BUSCH PLACE

City State Zip Code
ST. LOUIS MO 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11C.26328

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
BOSTON SCIENTIFIC CORPORATION POLITICAL ACTION COMMITTEE ('BSC PAC')
Mailing Address ONE BOSTON SCIENTIFIC PLACE

City State Zip Code
NATICK MA 01760

FEC ID number of contributing federal political committee. **C** C00357863

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11C.26623

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
BUILDING OWNERS AND MANAGERS ASSN INTERNATIONAL PAC (BOMAPAC)
Mailing Address 1201 NEW YORK AVENUE NW SUITE 300

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00106435

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 3 / 2 0 0 8

Transaction ID: SA11C.27227

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **4000.00**

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

**SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CITIGROUP INC POL ACTION CMTE-FEDERAL (CITIGROUP PAC-FEDERAL) FKA SALOMON SMITH BARNEY RECEIPT

Mailing Address 1101 PENNSYLVANIA AVE NW STE 1000

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00008474

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11C.27226

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
CITIZENS FINANCIAL GROUP INC. POLITICAL COMMITTEE

Mailing Address c/o Kenneth W. Robinson Treasurer
One Citizens Plaza 12th Floor

City State Zip Code
Providence RI 02903

FEC ID number of contributing federal political committee. **C** C00307249

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 27 / 2008

Transaction ID: SA11C.26738

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR HOPE RESPONSIBILITY INDEPENDENCE & SERVICE PAC (CHRIS PAC)

Mailing Address 607 14TH STREET NW SUITE 800

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00391961

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.27505

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 / 196
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) COMCAST CORP. POLITICAL ACTION COMMITTEE	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 1500 Market Street 35th Floor	Transaction ID: SA11C.26326
	City Philadelphia State PA Zip Code 19102	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00248716	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6500.00	

B.	Full Name (Last, First, Middle Initial) CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (CBA FED PAC)	Date of Receipt MM / DD / YYYY 05 / 30 / 2008
	Mailing Address 450 CHURCH ST.	Transaction ID: SA11C.26758
	City HARTFORD State CT Zip Code 06103	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C C00108605	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION	Date of Receipt MM / DD / YYYY 05 / 01 / 2008
	Mailing Address 8400 WESTPARK DRIVE	Transaction ID: SA11C.26422
	City MCLEAN State VA Zip Code 22102	Amount of Each Receipt this Period 4000.00
	FEC ID number of contributing federal political committee. C C00040998	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DELOITTE & TOUCHE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 365

City Washington State DC Zip Code 20044

FEC ID number of contributing federal political committee. **C** C00211318

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 10 / 2008
Transaction ID: SA11C.27178
 Amount of Each Receipt this Period: 2000.00

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

B. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-CONTRIBUTIONS

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 14.58

Date of Receipt: 06 / 30 / 2008
Transaction ID: SA11C.27440
 Amount of Each Receipt this Period: 6.69

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

C. Full Name (Last, First, Middle Initial)
DIAGEO NORTH AMERICA INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE
PO BOX 778

City NORWALK State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 05 / 01 / 2008
Transaction ID: SA11C.26324
 Amount of Each Receipt this Period: 2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4006.69

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

**SCHEDULE A (FEC Form 3)
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Use separate schedule(s)
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Detailed Summary Page

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(check only one)
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DIAGEO NORTH AMERICA INC. EMPLOYEES' POLITICAL PARTICIPATION COMMITTEE

Mailing Address 801 MAIN AVENUE
PO BOX 778

City NORWALK State CT Zip Code 06851

FEC ID number of contributing federal political committee. **C** C00034470

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
06 / 30 / 2008

Transaction ID: SA11C.27304

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
DICKSTEIN SHAPIRO LLP PAC

Mailing Address 1825 Eye Street NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00110197

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
05 / 28 / 2008

Transaction ID: SA11C.26754

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
DRIVE POLITICAL FUND

Mailing Address 25 Louisiana Avenue, N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00032979

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: MM / DD / YYYY
06 / 25 / 2008

Transaction ID: SA11C.27220

Amount of Each Receipt this Period: 5000.00

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

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 116 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERNST & YOUNG POLITICAL ACTION COMMITTEE

Mailing Address 1225 CONNECTICUT AVE NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2008

Transaction ID: SA11C.27177

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
FPL PAC FLORIDA POWER & LIGHT CO EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 700 Universe Blvd.
P.O. BOX 14000

City State Zip Code
Juno Beach FL 33408

FEC ID number of contributing federal political committee. **C** C00064774

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 05 / 2008

Transaction ID: SA11C.26528

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN

Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code
FALLS CHURCH VA 22042

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 22 / 2008

Transaction ID: SA11C.26617

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENESIS HEALTHCARE CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 101 EAST STATE STREET

City State Zip Code
KENNETT SQUARE PA 19348

FEC ID number of contributing federal political committee. **C** C00292094

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11C.26319

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
GOODRICH POLITICAL ACTION COMMITTEE

Mailing Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE

City State Zip Code
CHARLOTTE NC 28217

FEC ID number of contributing federal political committee. **C** C00101725

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11C.27179

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
HARTFORD FINANCIAL SERVICES GROUP INC ADVOCATES FUND FKA (HARTFORD ADVOCATES FUND)

Mailing Address HARTFORD PLAZA
HARTFORD PLAZA

City State Zip Code
HARTFORD CT 06115

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11C.26322

Amount of Each Receipt this Period
4500.00

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

SUBTOTAL of Receipts This Page (optional) ► **6500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1615 L Street NW
Suite 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.27469

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 FIRST STREET SE SUITE 300

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11C.26327

Amount of Each Receipt this Period

2000.00

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

C.

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 FIRST STREET SE SUITE 300

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 10 / 2008

Transaction ID: SA11C.27184

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional) ▶

4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 119 / 196

(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES POLITICAL ACTION TOGETHER POLITICAL	Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 8
	Mailing Address 1750 New York Avenue, NW	Transaction ID: SA11C.26597
	City Washington State DC Zip Code 20006	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C C00000885	Returned 7/14/08
	Name of Employer Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00

B.	Full Name (Last, First, Middle Initial) KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACTION COMMITTEE	Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 0 / 2 0 0 8
	Mailing Address PO BOX 18254	Transaction ID: SA11C.27180
	City WASHINGTON State DC Zip Code 20036	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. C C00280222	Redesignation Requested
	Name of Employer Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00

C.	Full Name (Last, First, Middle Initial) LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA	Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 7 / 2 0 0 8
	Mailing Address 905 16TH STREET, N.W.	Transaction ID: SA11C.26739
	City WASHINGTON State DC Zip Code 20006	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C C00007922	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation	
	Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00

SUBTOTAL of Receipts This Page (optional) ▶

2800.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 120 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 05 / 15 / 2008
Transaction ID: SA11C.27509
 Amount of Each Receipt this Period: 2500.00

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

B. Full Name (Last, First, Middle Initial)
MARRIOTT INTERNATIONAL INC. POLITICAL ACTION COMMITTEE

Mailing Address Marriott Drive

City Washington State DC Zip Code 20058

FEC ID number of contributing federal political committee. **C** C00284810

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 06 / 23 / 2008
Transaction ID: SA11C.27223
 Amount of Each Receipt this Period: 2500.00

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

C. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City SPRINGFIELD State MA Zip Code 01111

FEC ID number of contributing federal political committee. **C** C00118943

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt: 06 / 19 / 2008
Transaction ID: SA11C.27192
 Amount of Each Receipt this Period: 2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 7000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 121 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MGM MIRAGE PAC

Mailing Address 591 REDWOOD HIGHWAY #4000

City State Zip Code
MILL VALLEY CA 94941

FEC ID number of contributing federal political committee. **C** C00299321

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 2 / 2 0 0 8

Transaction ID: SA11C.26591

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 16011 NE 36TH WAY
BOX 97017

City State Zip Code
REDMOND WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11C.26616

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL ACTIVE AND RETIRED FEDERAL EMPLOYEES ASSOCIATION POLITICAL ACTION COM (NARFE)

Mailing Address 606 NORTH WASHINGTON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00091561

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11C.27187

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATAC) Receipt
 Mailing Address 1150 17TH STREET NW SUITE 701
 Date of Receipt: M M / D D / Y Y Y Y Y
 06 / 23 / 2008
Transaction ID: SA11C.27222
 Amount of Each Receipt this Period: 1000.00
 Name of Employer: _____ Occupation: _____
 Receipt For: 2008 Election Cycle-to-Date: 1000.00
 Primary General
 Other (specify) ▼

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF FEDERAL CREDIT UNIONS POLITICAL ACTION COMMITTEE
 Mailing Address 3138 North 10th Street
 Date of Receipt: M M / D D / Y Y Y Y Y
 05 / 27 / 2008
Transaction ID: SA11C.26744
 Amount of Each Receipt this Period: 1000.00
 Name of Employer: _____ Occupation: _____
 Receipt For: 2008 Election Cycle-to-Date: 1000.00
 Primary General
 Other (specify) ▼

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE
 Mailing Address 1875 Eye Street NW Suite 600
 Date of Receipt: M M / D D / Y Y Y Y Y
 05 / 27 / 2008
Transaction ID: SA11C.26761
 Amount of Each Receipt this Period: 2500.00
 Name of Employer: _____ Occupation: _____
 Receipt For: 2008 Election Cycle-to-Date: 5000.00
 Primary General
 Other (specify) ▼

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 123 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS' ASSOCIATION POLITICAL ACTION COMMITTEE (NBWA PAC)
Mailing Address 1100 SOUTH WASHINGTON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 2 / 2 0 0 8

Transaction ID: SA11C.26321

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS' ASSOCIATION POLITICAL ACTION COMMITTEE (NBWA PAC)
Mailing Address 1100 SOUTH WASHINGTON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00144766

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11C.26588

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC
Mailing Address 1605 King Street

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11C.26563

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 6000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
NEA FUND FOR CHILDREN AND PUBLIC EDUCATION; THE (FKA NEAPAC)

Mailing Address 1201 16TH STREET NW #421

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.26598

Amount of Each Receipt this Period

1500.00

Redesignation Req. - Cont.
Returned

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

B.

Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE (910)

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5500.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.26586

Amount of Each Receipt this Period

500.00

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

C.

Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE (910)

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7000.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.26599

Amount of Each Receipt this Period

1500.00

Redesignation Req. - Cont.
Returned

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

SUBTOTAL of Receipts This Page (optional) ►

3500.00

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

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

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

FOR LINE NUMBER: PAGE 125 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE (910)

City State Zip Code
NEW YORK NY 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 8000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 10 / 2008

Transaction ID: SA11C.27141

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
OPPENHEIMERFUNDS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code
Springfield MA 01111

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2008

Transaction ID: SA11C.27190

Amount of Each Receipt this Period
 1000.00

Redesignation Requested

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

C. Full Name (Last, First, Middle Initial)
OPPENHEIMERFUNDS INC. POLITICAL ACTION COMMITTEE

Mailing Address 1295 State Street

City State Zip Code
Springfield MA 01111

FEC ID number of contributing federal political committee. **C** C00367920

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 19 / 2008

Transaction ID: SA11C.27194

Amount of Each Receipt this Period
 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PENNEY PAC - J.C.PENNEY CORP. INC. POLITICAL ACTION COMMITTEE

Mailing Address 6501 LEGACY DR.

City PLANO State TX Zip Code 75024

FEC ID number of contributing federal political committee. **C** C00042895

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 22 / 2008
Transaction ID: SA11C.26618
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
PEOPLE'S BANK FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 850 MAIN STREET
PO BOX 1580

City BRIDGEPORT State CT Zip Code 06604

FEC ID number of contributing federal political committee. **C** C00178012

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 05 / 30 / 2008
Transaction ID: SA11C.26640
 Amount of Each Receipt this Period: 250.00

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

C. Full Name (Last, First, Middle Initial)
PITNEY BOWES INC POLITICAL ACTION COMMITTEE

Mailing Address 1 ELMCROFT ROAD
MSC 6423

City STAMFORD State CT Zip Code 06926

FEC ID number of contributing federal political committee. **C** C00339499

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 06 / 19 / 2008
Transaction ID: SA11C.27195
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 196
(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PMA GROUP POLITICAL ACTION COMMITTEE

Mailing Address 1755 Jefferson Davis Highway
Suite 1107

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00280321

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11C.26329

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE II

Mailing Address 1900 K STREET NW SUITE 900

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00232173

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6500.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 1 0 / 2 0 0 8

Transaction ID: SA11C.27142

Amount of Each Receipt this Period
1500.00

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

C. Full Name (Last, First, Middle Initial)
ROBINSON & COLE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address ONE COMMERCIAL PLAZA

City State Zip Code
HARTFORD CT 06103

FEC ID number of contributing federal political committee. **C** C00341321

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11C.27508

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SECURITIES INDUSTRY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1425 K Street NW
7th Floor

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00067504

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 10 / 2008

Transaction ID: SA11C.27185

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
SERVICE EMPLOYEES INTERNATIONAL UNION COMMITTEE ON POLITICAL EDUCATION (SEIU)

Mailing Address 1800 Massachusetts Ave NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004036

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
05 / 01 / 2008

Transaction ID: SA11C.26421

Amount of Each Receipt this Period
5000.00

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

C. Full Name (Last, First, Middle Initial)
SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)

Mailing Address Five Moore Drive
P.O. Box 13358

City State Zip Code
Res. Triangle Park NC 27709

FEC ID number of contributing federal political committee. **C** C00199703

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 10 / 2008

Transaction ID: SA11C.27182

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 10000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND

Mailing Address 1101 Pennsylvania Avenue NW
Suite 800

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00431361

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: M M / D D / Y Y Y Y Y
06 / 02 / 2008

Transaction ID: SA11C.26840

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
TIME WARNER POLITICAL ACTION CMTE

Mailing Address 800 Connecticut Ave. NW
Suite 1200

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: M M / D D / Y Y Y Y Y
06 / 25 / 2008

Transaction ID: SA11C.27225

Amount of Each Receipt this Period: 2500.00

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

C. Full Name (Last, First, Middle Initial)
TRAVELERS PROPERTY CASUALTY CORP. POLITICAL ACTION COMMITTEE (TAP PAC)

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt: M M / D D / Y Y Y Y Y
05 / 15 / 2008

Transaction ID: SA11C.26587

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

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

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

FOR LINE NUMBER: PAGE 130 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
U.B.C. New England Regional Council of Carpenters C.L.I.C.
Mailing Address 427 Stillson Road

City State Zip Code
Fairfield CT 06824

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11C.27489

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
UBS AMERICAS FUND FOR BETTER GOVERNMENT
Mailing Address 1285 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 5 / 2 7 / 2 0 0 8

Transaction ID: SA11C.26742

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
UBS AMERICAS FUND FOR BETTER GOVERNMENT
Mailing Address 1285 AVENUE OF THE AMERICAS

City State Zip Code
NEW YORK NY 10019

FEC ID number of contributing federal political committee. **C** C00012245

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 3 0 / 2 0 0 8

Transaction ID: SA11C.27295

Amount of Each Receipt this Period
4000.00

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

SUBTOTAL of Receipts This Page (optional) ► **10000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 131 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEBSTER BANK PAC - FEDERAL

Mailing Address WEBSTER PLAZA 145 BANK STREET

City WATERBURY State CT Zip Code 06720

FEC ID number of contributing federal political committee. **C** C00321406

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 05 / 30 / 2008
Transaction ID: SA11C.26639
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
WINE INSTITUTE POLITICAL ACTION COMMITTEE

Mailing Address 607 14th Street NW Suite 800 Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00065219

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 06 / 25 / 2008
Transaction ID: SA11C.27214
 Amount of Each Receipt this Period: 500.00

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

C. Full Name (Last, First, Middle Initial)
ZURICH HOLDING COMPANY OF AMERICA COMMITTEE FOR GOOD GOVERNMENT (Z-PAC)

Mailing Address 1201 F Street NW

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00235036

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 28 / 2008
Transaction ID: SA11C.26756
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ► 140306.69

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

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

FOR LINE NUMBER: PAGE 132 / 196
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 12138.93

Date of Receipt
M M / D D / Y Y Y Y
05 / 03 / 2008

Transaction ID: SA15.27441

Amount of Each Receipt this Period
381.61

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

B.

Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 12815.18

Date of Receipt
M M / D D / Y Y Y Y
06 / 03 / 2008

Transaction ID: SA15.27442

Amount of Each Receipt this Period
676.25

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

SUBTOTAL of Receipts This Page (optional)	1057.86
TOTAL This Period (last page this line number only)	1057.86

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Ace Printery, Inc.

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27341
Date of Disbursement

05 / 03 / 2008

Amount of Each Disbursement this Period

1404.50

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

B.

Full Name (Last, First, Middle Initial)
Ace Printery, Inc.

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27398
Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

159.00

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

C.

Full Name (Last, First, Middle Initial)
Ace Printery, Inc.

Mailing Address 41 Walnut Street

City Hartford State CT Zip Code 06120

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27399
Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

386.90

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

SUBTOTAL of Disbursements This Page (optional) ▶

1950.40

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Ace Printery, Inc. <hr/> Mailing Address 41 Walnut Street <hr/> City Hartford State CT Zip Code 06120 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.27427 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 530.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) American Coun. of Life Insurance <hr/> Mailing Address 101 Constitution ave., NW <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Facility Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.27417 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 625.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address P.O. Box 114 <hr/> City Newark State NJ Zip Code 07101 <hr/> Purpose of Disbursement Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.26855 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 5.95 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1160.95
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 114</p> <p>City Newark State NJ Zip Code 07101</p> <p>Purpose of Disbursement Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26856</p> <p>Date of Disbursement 05 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 7.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 114</p> <p>City Newark State NJ Zip Code 07101</p> <p>Purpose of Disbursement Credit Card Payment (see below)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 2883.86</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Marriott Hartford Downtown</p> <p>Mailing Address 200 Columbus Boulevard</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.0</p> <p>Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 38.69</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2891.24

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Cavey's</p> <p>Mailing Address 43 E. Center Street</p> <p>City Manchester State CT Zip Code 06040</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.1 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 80.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Parma Restaurant</p> <p>Mailing Address 21 Rankin Road</p> <p>City Glastonbury State CT Zip Code 06033</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.2 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 42.93</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Sheraton Hotels</p> <p>Mailing Address East River Drive</p> <p>City East Hartford State CT Zip Code 06108</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.3 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 26.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Cavey's</p> <p>Mailing Address 43 E. Center Street</p> <p>City Manchester State CT Zip Code 06040</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.5 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 116.45</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Peppercorn's Grill</p> <p>Mailing Address P.O. Box 776</p> <p>City Plainville State CT Zip Code 06062</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.8 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 167.87</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Peppercorn's Grill</p> <p>Mailing Address P.O. Box 776</p> <p>City Plainville State CT Zip Code 06062</p> <p>Purpose of Disbursement Political meals</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26962.10 Date of Disbursement 05 / 07 / 2008</p> <p>Amount of Each Disbursement this Period 179.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Kinkead's Mailing Address 200 Pennsylvania Avenue N.W. City Washington State DC Zip Code 20006 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26962.12 Date of Disbursement MM / DD / YYYY 05 / 07 / 2008 Amount of Each Disbursement this Period 233.71 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) COSI#16 Mailing Address 1700 Pennsylvania Avenue NW City Washington State DC Zip Code 20006 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26962.15 Date of Disbursement MM / DD / YYYY 05 / 07 / 2008 Amount of Each Disbursement this Period 154.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Bedford Village Inn Mailing Address 2 Olde Bedford Way City Bedford State NH Zip Code 03110 Purpose of Disbursement Travel 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) ▼	Transaction ID: SB17.26962.20 Date of Disbursement MM / DD / YYYY 05 / 07 / 2008 Amount of Each Disbursement this Period 137.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
COSI#16

Mailing Address 1700 Pennsylvania Avenue NW

City Washington State DC Zip Code 20006

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26962.21

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

72.82

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26962.22

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

68.07

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
The National Democratic Club

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26962.23

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

36.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: SB17.26962.24 Date of Disbursement 05 / 07 / 2008
	Mailing Address: Bradley International Airport	Amount of Each Disbursement this Period 390.00
	City: Windsor Locks State: CT Zip Code: 06096	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: Travel	[MEMO ITEM]
	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) ▼	
	State: _____ District: _____	

B.	Full Name (Last, First, Middle Initial) United Air Lines	Transaction ID: SB17.26962.25 Date of Disbursement 05 / 07 / 2008
	Mailing Address: Bradley International Airport	Amount of Each Disbursement this Period 354.50
	City: Windsor Locks State: CT Zip Code: 06000	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: Travel	[MEMO ITEM]
	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) ▼	
	State: _____ District: _____	

C.	Full Name (Last, First, Middle Initial) Sanditz Travel	Transaction ID: SB17.26962.26 Date of Disbursement 05 / 07 / 2008
	Mailing Address: 98 Washington Street	Amount of Each Disbursement this Period 40.00
	City: Middletown State: CT Zip Code: 06457	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement: Travel	[MEMO ITEM]
	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) ▼	
	State: _____ District: _____	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Kinkead's Mailing Address 200 Pennsylvania Avenue N.W. City Washington State DC Zip Code 20006 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26962.27 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 197.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 114 City Newark State NJ Zip Code 07101 Purpose of Disbursement Service Charge 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) ▼	Transaction ID: SB17.27446 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 8 Amount of Each Disbursement this Period 5.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 114 City Newark State NJ Zip Code 07101 Purpose of Disbursement Service Charge 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) ▼	Transaction ID: SB17.27452 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 151.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	157.88
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 114

City Newark State NJ Zip Code 07101

Purpose of Disbursement
Credit Card Payment (see below)

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868
Date of Disbursement

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

Amount of Each Disbursement this Period

5483.46

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

B.

Full Name (Last, First, Middle Initial)
Caesars Hotel

Mailing Address 3570 Las Vegas Blvd.

City Las Vegas State NV Zip Code 89109

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.0
Date of Disbursement

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

Amount of Each Disbursement this Period

354.25

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Cavey's

Mailing Address 43 E. Center Street

City Manchester State CT Zip Code 06040

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.1
Date of Disbursement

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

Amount of Each Disbursement this Period

83.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

5483.46

TOTAL This Period (last page this line number only) ▶

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The National Democratic Club	Transaction ID: SB17.26868.2 Date of Disbursement 06 / 08 / 2008
	Mailing Address 30 Ivy Street, SE	Amount of Each Disbursement this Period 34.75
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼

B.	Full Name (Last, First, Middle Initial) The National Democratic Club	Transaction ID: SB17.26868.3 Date of Disbursement 06 / 08 / 2008
	Mailing Address 30 Ivy Street, SE	Amount of Each Disbursement this Period 301.25
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼

C.	Full Name (Last, First, Middle Initial) Bistro Bis	Transaction ID: SB17.26868.4 Date of Disbursement 06 / 08 / 2008
	Mailing Address 15 E Street NW	Amount of Each Disbursement this Period 240.75
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The National Democratic Club

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political meals
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.5
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

84.63

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
COSI#16

Mailing Address 1700 Pennsylvania Avenue NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Political meals
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.6
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

70.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
U.S. House Dining Room

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political meals
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.7
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

70.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The National Democratic Club

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20002

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.8

Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

51.25

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Cavey's

Mailing Address 43 E. Center Street

City Manchester State CT Zip Code 06040

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.9

Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

280.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement

Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.10

Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

68.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Cafe Mangia Mailing Address 68 Linwood Avenue City Colchester State CT Zip Code 06415 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26868.11 Date of Disbursement 06 / 08 / 2008 Amount of Each Disbursement this Period 327.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Dream Hotel Mailing Address 210 W. 55th Street City New York State NY Zip Code 10019 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26868.17 Date of Disbursement 06 / 08 / 2008 Amount of Each Disbursement this Period 278.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Dream Hotel Mailing Address 210 W. 55th Street City New York State NY Zip Code 10019 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26868.18 Date of Disbursement 06 / 08 / 2008 Amount of Each Disbursement this Period 263.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement
Political meals
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.19
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

68.98

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Premier Limousine

Mailing Address 126 Kreiger Lane

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Travel
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.20
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

361.12

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Premier Limousine

Mailing Address 126 Kreiger Lane

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Travel
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.21
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

301.27

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
U.S. House Dining Room

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.23
Date of Disbursement
06 / 08 / 2008

Amount of Each Disbursement this Period
7.90

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
U.S. House Dining Room

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.24
Date of Disbursement
06 / 08 / 2008

Amount of Each Disbursement this Period
21.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement
Political meals

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26868.25
Date of Disbursement
06 / 08 / 2008

Amount of Each Disbursement this Period
103.39

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Sonoma	Transaction ID: SB17.26868.27 Date of Disbursement 06 / 08 / 2008
	Mailing Address 223 Pennsylvania Avenue, S.E.	Amount of Each Disbursement this Period 63.80
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼

B.	Full Name (Last, First, Middle Initial) The National Democratic Club	Transaction ID: SB17.26868.29 Date of Disbursement 06 / 08 / 2008
	Mailing Address 30 Ivy Street, SE	Amount of Each Disbursement this Period 36.00
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼

C.	Full Name (Last, First, Middle Initial) COSI#16	Transaction ID: SB17.26868.30 Date of Disbursement 06 / 08 / 2008
	Mailing Address 1700 Pennsylvania Avenue NW	Amount of Each Disbursement this Period 73.66
	City Washington State DC Zip Code 20006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) VIP Limo Services</p> <p>Mailing Address 7 Carlsbad Drive</p> <p>City Stafford State VA Zip Code 22554</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26868.31</p> <p>Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 44.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Sanditz Travel</p> <p>Mailing Address 98 Washington Street</p> <p>City Middletown State CT Zip Code 06457</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26868.32</p> <p>Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 48.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) United Air Lines</p> <p>Mailing Address Bradley International Airport</p> <p>City Windsor Locks State CT Zip Code 06000</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26868.33</p> <p>Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 125.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) U.S. House Dining Room	Transaction ID: SB17.26868.34 Date of Disbursement 06 / 08 / 2008
	Mailing Address U.S. Capitol	Amount of Each Disbursement this Period 37.55
	City Washington State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼	

B.	Full Name (Last, First, Middle Initial) Caesars Hotel	Transaction ID: SB17.26868.36 Date of Disbursement 06 / 08 / 2008
	Mailing Address 3570 Las Vegas Blvd.	Amount of Each Disbursement this Period 59.50
	City Las Vegas State NV Zip Code 89109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Political meals 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) ▼	

C.	Full Name (Last, First, Middle Initial) Caesars Hotel	Transaction ID: SB17.26868.37 Date of Disbursement 06 / 08 / 2008
	Mailing Address 3570 Las Vegas Blvd.	Amount of Each Disbursement this Period 5.00
	City Las Vegas State NV Zip Code 89109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Travel 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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address Bradley International Airport

City Windsor Locks State CT Zip Code 06096

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.38
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

25.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Marriott Hartford Downtown

Mailing Address 200 Columbus Boulevard

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.39
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

40.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.40
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	0	8

Amount of Each Disbursement this Period

51.82

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
United Air Lines

Mailing Address Bradley International Airport

City Windsor Locks State CT Zip Code 06000

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.41
Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

576.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
The National Democratic Club

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.42
Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

56.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
COSI#16

Mailing Address 1700 Pennsylvania Avenue NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26868.44
Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

73.66

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Amazon	Transaction ID: SB17.26868.45
	Mailing Address Information Requested	Date of Disbursement 06 / 08 / 2008
	City State Zip Code Information Req. CT 06000	Amount of Each Disbursement this Period 266.03
	Purpose of Disbursement Books	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB17.27373
	Mailing Address 5 West Service Road	Date of Disbursement 05 / 20 / 2008
	City State Zip Code Hartford CT 06042	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Deposit	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB17.27423
	Mailing Address 5 West Service Road	Date of Disbursement 06 / 26 / 2008
	City State Zip Code Hartford CT 06042	Amount of Each Disbursement this Period 690.64
	Purpose of Disbursement Telephone Service	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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)	▶	1290.64
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Balloons Above <hr/> Mailing Address 16 Elizabeth Road <hr/> City Farmington State CT Zip Code 06032 <hr/> Purpose of Disbursement Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27359 Date of Disbursement 05 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 381.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Callahan Flower Shop <hr/> Mailing Address 1429 Main Street <hr/> City East Hartford State CT Zip Code 06108 <hr/> Purpose of Disbursement Flowers Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27353 Date of Disbursement 05 / 07 / 2008 <hr/> Amount of Each Disbursement this Period 423.86 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Callahan Flower Shop <hr/> Mailing Address 1429 Main Street <hr/> City East Hartford State CT Zip Code 06108 <hr/> Purpose of Disbursement Flowers Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27394 Date of Disbursement 06 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 181.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	986.35
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Capital Bankcard

Transaction ID: SB17.26858
Date of Disbursement

Mailing Address P. O. Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	0	8

City Hagerstown State MD Zip Code 21740

Amount of Each Disbursement this Period

24.95

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)
Capital Bankcard

Transaction ID: SB17.27448
Date of Disbursement

Mailing Address P. O. Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	0	8

City Hagerstown State MD Zip Code 21740

Amount of Each Disbursement this Period

24.95

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)
Capital One

Transaction ID: SB17.26925
Date of Disbursement

Mailing Address P.O. Box 60024

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	0	8

City City of Industry State CA Zip Code 91716

Amount of Each Disbursement this Period

4868.90

Purpose of Disbursement
Credit Card Payment (see below)
Candidate Name

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4918.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
U. S. Postmaster

Mailing Address Ann Street

City Hartford State CT Zip Code 06103

Purpose of Disbursement Postage
Candidate Name _____ Category/Type _____

Office Sought: House Senate President
State: _____ District: _____
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26925.0
Date of Disbursement

^M 0	^M 5	/	^D 2	^D 6	/	^Y 2	^Y 0	^Y 0	^Y 8
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Amount of Each Disbursement this Period

23.58

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
EarthLink, Inc.

Mailing Address P.O. Box 7645

City Atlanta State GA Zip Code 30357

Purpose of Disbursement Internet
Candidate Name _____ Category/Type _____

Office Sought: House Senate President
State: _____ District: _____
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26925.1
Date of Disbursement

^M 0	^M 5	/	^D 2	^D 6	/	^Y 2	^Y 0	^Y 0	^Y 8
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Amount of Each Disbursement this Period

19.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address Asylum Street

City Hartford State CT Zip Code 06105

Purpose of Disbursement Overnight Courier
Candidate Name _____ Category/Type _____

Office Sought: House Senate President
State: _____ District: _____
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.26925.2
Date of Disbursement

^M 0	^M 5	/	^D 2	^D 6	/	^Y 2	^Y 0	^Y 0	^Y 8
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Amount of Each Disbursement this Period

54.36

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

0.00

TOTAL This Period (last page this line number only) ►

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 20 Alexander Drive</p> <p>City Wallingford State CT Zip Code 06492</p> <p>Purpose of Disbursement Cell Phone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26925.5</p> <p>Date of Disbursement 05 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 393.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Midwest Airlines</p> <p>Mailing Address 6744 South Howell Avenue</p> <p>City Oak Creek State WI Zip Code 53154</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26925.6</p> <p>Date of Disbursement 05 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 323.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Midwest Airlines</p> <p>Mailing Address 6744 South Howell Avenue</p> <p>City Oak Creek State WI Zip Code 53154</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.26925.7</p> <p>Date of Disbursement 05 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 10.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
U. S. Airways

Mailing Address Bradley International Airport

City Windsor Locks State CT Zip Code 06196

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26925.8
Date of Disbursement

05 / 26 / 2008

Amount of Each Disbursement this Period

527.50

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Sam's Club

Mailing Address 69 Pavillion Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement
Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26925.9
Date of Disbursement

05 / 26 / 2008

Amount of Each Disbursement this Period

18.94

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Marriott Hartford Downtown

Mailing Address 200 Columbus Boulevard

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Political meals

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.26925.10
Date of Disbursement

05 / 26 / 2008

Amount of Each Disbursement this Period

38.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.26925.11 Date of Disbursement
	Mailing Address 521 Connecticut Boulevard	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City East Hartford State CT Zip Code 06108	Amount of Each Disbursement this Period
	Purpose of Disbursement Supplies	<input type="text" value="13.77"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.26925.13 Date of Disbursement
	Mailing Address 521 Connecticut Boulevard	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City East Hartford State CT Zip Code 06108	Amount of Each Disbursement this Period
	Purpose of Disbursement Supplies	<input type="text" value="20.13"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.26925.14 Date of Disbursement
	Mailing Address 521 Connecticut Boulevard	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City East Hartford State CT Zip Code 06108	Amount of Each Disbursement this Period
	Purpose of Disbursement Supplies	<input type="text" value="192.88"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Vonage	Transaction ID: SB17.26925.16
	Mailing Address 23 Main Street	Date of Disbursement 05 / 26 / 2008
	City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period 62.28
	Purpose of Disbursement Telephone Service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: SB17.26925.17
	Mailing Address 1101 Vermont Avenue, NW	Date of Disbursement 05 / 26 / 2008
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 650.00
	Purpose of Disbursement Service Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Marriott Hartford Downtown	Transaction ID: SB17.26925.20
	Mailing Address 200 Columbus Boulevard	Date of Disbursement 05 / 26 / 2008
	City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period 267.44
	Purpose of Disbursement Catering Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Marriott Hartford Downtown	Transaction ID: SB17.26925.21 Date of Disbursement
	Mailing Address 200 Columbus Boulevard	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Hartford State CT Zip Code 06106	Amount of Each Disbursement this Period
	Purpose of Disbursement Political meals	<input type="text" value="12.14"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: SB17.26925.23 Date of Disbursement
	Mailing Address 521 Connecticut Boulevard	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City East Hartford State CT Zip Code 06108	Amount of Each Disbursement this Period
	Purpose of Disbursement Supplies	<input type="text" value="158.99"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) EarthLink, Inc.	Transaction ID: SB17.26925.24 Date of Disbursement
	Mailing Address P.O. Box 7645	<input type="text" value="05"/> <input type="text" value="26"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Atlanta State GA Zip Code 30357	Amount of Each Disbursement this Period
	Purpose of Disbursement Internet	<input type="text" value="19.95"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	[MEMO ITEM]
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Peppercorn's Grill Mailing Address P.O. Box 776 City Plainville State CT Zip Code 06062 Purpose of Disbursement Political meals 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) ▼	Transaction ID: SB17.26925.26 Date of Disbursement 05 / 26 / 2008 Amount of Each Disbursement this Period 78.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Vonage Mailing Address 23 Main Street City Holmdel State NJ Zip Code 07733 Purpose of Disbursement Telephone service 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) ▼	Transaction ID: SB17.26925.27 Date of Disbursement 05 / 26 / 2008 Amount of Each Disbursement this Period 62.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Hot Tomato's Mailing Address 1 Union Place City Hartford State CT Zip Code 06103 Purpose of Disbursement Catering 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) ▼	Transaction ID: SB17.26925.28 Date of Disbursement 05 / 26 / 2008 Amount of Each Disbursement this Period 898.65 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	0.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NGP Software, Inc. <hr/> Mailing Address 1101 Vermont Avenue, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Service Candidate Name <hr/> 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) ▼	Transaction ID: SB17.26925.29 Date of Disbursement 05 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 650.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address 521 Connecticut Boulevard <hr/> City East Hartford State CT Zip Code 06108 <hr/> Purpose of Disbursement Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB17.26925.30 Date of Disbursement 05 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 63.57 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Capital One <hr/> Mailing Address P.O. Box 60024 <hr/> City City of Industry State CA Zip Code 91716 <hr/> Purpose of Disbursement Credit Card Payment (see below) Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27420 Date of Disbursement 06 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 1178.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1178.22
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) EarthLink, Inc.	Transaction ID: SB17.27420.1 Date of Disbursement 06 / 26 / 2008
	Mailing Address P.O. Box 7645	Amount of Each Disbursement this Period 19.95
	City Atlanta State GA Zip Code 30357	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Internet 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) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: SB17.27420.2 Date of Disbursement 06 / 26 / 2008
	Mailing Address Asylum Street	Amount of Each Disbursement this Period 41.24
	City Hartford State CT Zip Code 06105	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Overnight Courier 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) ▼

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: SB17.27420.3 Date of Disbursement 06 / 26 / 2008
	Mailing Address 20 Alexander Drive	Amount of Each Disbursement this Period 211.99
	City Wallingford State CT Zip Code 06492	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Cell Phone Service 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)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address Asylum Street

City Hartford State CT Zip Code 06105

Purpose of Disbursement
Overnight Courier

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27420.4
Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

19.19

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Internet

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27420.5
Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

650.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Vonage

Mailing Address 23 Main Street

City Holmdel State NJ Zip Code 07733

Purpose of Disbursement
Telephone

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27420.6
Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

62.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Staples Mailing Address 521 Connecticut Boulevard City East Hartford State CT Zip Code 06108 Purpose of Disbursement Supplies 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) ▼	Transaction ID: SB17.27420.8 Date of Disbursement 06 / 26 / 2008 Amount of Each Disbursement this Period 70.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Connecticut Jewish Ledger Mailing Address 740 North Main Street City West Hartford State CT Zip Code 06117 Purpose of Disbursement Advertisement 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) ▼	Transaction ID: SB17.27352 Date of Disbursement 05 / 07 / 2008 Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Connecticut Working Families Mailing Address 621 Farmington Avenue City Hartford State CT Zip Code 06105 Purpose of Disbursement Advertisement 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) ▼	Transaction ID: SB17.27375 Date of Disbursement 05 / 26 / 2008 Amount of Each Disbursement this Period 400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	550.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Express EMPS Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21740 Purpose of Disbursement Service Charge 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) ▼		Transaction ID: SB17.27451 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 182.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Golden Rule Insurance Company Mailing Address P.O. Box 740209 City Cincinnati State OH Zip Code 45274 Purpose of Disbursement Insurance 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) ▼		Transaction ID: SB17.27433 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 8 Amount of Each Disbursement this Period 533.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Steven Johnson Mailing Address 47 Huckleberry Lane City West Hartford State CT Zip Code 06110 Purpose of Disbursement Entertainment 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) ▼		Transaction ID: SB17.27356 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 300.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1015.82
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lori LaFave</p> <hr/> <p>Mailing Address 200 East Jefferson Street</p> <hr/> <p>City Falls Church State VA Zip Code 22046</p> <hr/> <p>Purpose of Disbursement Reimbursement - Catering</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27343</p> <p>Date of Disbursement</p> <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>5</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">1758.33</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	0	8	1758.33
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	3		2	0	0	8													
1758.33																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lori LaFave</p> <hr/> <p>Mailing Address 200 East Jefferson Street</p> <hr/> <p>City Falls Church State VA Zip Code 22046</p> <hr/> <p>Purpose of Disbursement Fundraising</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27344</p> <p>Date of Disbursement</p> <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>5</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">3000.00</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	3		2	0	0	8	3000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	5		0	3		2	0	0	8													
3000.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lori LaFave</p> <hr/> <p>Mailing Address 200 East Jefferson Street</p> <hr/> <p>City Falls Church State VA Zip Code 22046</p> <hr/> <p>Purpose of Disbursement Reimbursement - Catering</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27397</p> <p>Date of Disbursement</p> <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>6</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">1970.50</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	8		2	0	0	8	1970.50
M	M	/	D	D	/	Y	Y	Y	Y													
0	6		0	8		2	0	0	8													
1970.50																						

SUBTOTAL of Disbursements This Page (optional)	6728.83
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Lori LaFave Mailing Address 200 East Jefferson Street City Falls Church State VA Zip Code 22046 Purpose of Disbursement Reimbursement - Catering 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) ▼	Transaction ID: SB17.27400 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 2436.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Lori LaFave Mailing Address 200 East Jefferson Street City Falls Church State VA Zip Code 22046 Purpose of Disbursement Fundraising 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) ▼	Transaction ID: SB17.27401 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Lori LaFave Mailing Address 200 East Jefferson Street City Falls Church State VA Zip Code 22046 Purpose of Disbursement Fundraising 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) ▼	Transaction ID: SB17.27421 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8	Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	8436.50
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Lori LaFave

Mailing Address 200 East Jefferson Street

City Falls Church State VA Zip Code 22046

Purpose of Disbursement
Reimbursement - Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27426
Date of Disbursement

06 / 26 / 2008

Amount of Each Disbursement this Period

170.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Mailing Address 345 Buckland Hills Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27332
Date of Disbursement

04 / 24 / 2008

Amount of Each Disbursement this Period

1689.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Mailing Address 345 Buckland Hills Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement
Reimbursement - Health Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27333
Date of Disbursement

04 / 24 / 2008

Amount of Each Disbursement this Period

540.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2400.18

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Reimbursement - Cell Phone 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) ▼	Transaction ID: SB17.27334 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 8 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Reimbursement - Postage Stamps 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) ▼	Transaction ID: SB17.27345 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 8 Amount of Each Disbursement this Period 164.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Reimbursement - Supplies 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) ▼	Transaction ID: SB17.27355 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 8 Amount of Each Disbursement this Period 97.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	361.49
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Salary 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) ▼	Transaction ID: SB17.27361 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 1689.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Reimbursement - Supplies 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) ▼	Transaction ID: SB17.27368 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 90.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg Mailing Address 345 Buckland Hills Drive City Manchester State CT Zip Code 06040 Purpose of Disbursement Reimbursement - Supplies 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) ▼	Transaction ID: SB17.27369 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 8
	Amount of Each Disbursement this Period 87.23 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1866.65
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Reimbursement - Postage Candidate Name _____ <hr/> 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) ▼	Transaction ID: SB17.27370 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1165.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Reimbursement - Supplies Candidate Name _____ <hr/> 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) ▼	Transaction ID: SB17.27371 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 127.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Salary Candidate Name _____ <hr/> 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) ▼	Transaction ID: SB17.27374 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1689.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	2982.49
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27377 Date of Disbursement 05 / 26 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 18.00
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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) ▼

B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27378 Date of Disbursement 05 / 26 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 49.99
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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) ▼

C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27391 Date of Disbursement 06 / 06 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 1689.38
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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)	▶	1757.37
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27402 Date of Disbursement 06 / 08 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 55.02
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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) ▼

B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27403 Date of Disbursement 06 / 08 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 50.00
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Cell Phone 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) ▼

C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27406 Date of Disbursement 06 / 08 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 54.25
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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)	159.27
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Reimbursement - Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27407 Date of Disbursement 06 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 79.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Reimbursement - Supplies Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27408 Date of Disbursement 06 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 35.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg <hr/> Mailing Address 345 Buckland Hills Drive <hr/> City Manchester State CT Zip Code 06040 <hr/> Purpose of Disbursement Reimbursement - Postage Stamps Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27413 Date of Disbursement 06 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1115.48
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27414 Date of Disbursement 06 / 19 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 1689.38
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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) ▼

B.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27422 Date of Disbursement 06 / 26 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 50.00
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Cell Phone 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) ▼

C.	Full Name (Last, First, Middle Initial) Geoffrey R. Luxenberg	Transaction ID: SB17.27424 Date of Disbursement 06 / 26 / 2008
	Mailing Address 345 Buckland Hills Drive	Amount of Each Disbursement this Period 46.16
	City Manchester State CT Zip Code 06040	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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)	▶	1785.54
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="checked" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Mailing Address 345 Buckland Hills Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement: Reimbursement - Supplies

Candidate Name: Category/Type:

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: SB17.27429
Date of Disbursement: 06 / 26 / 2008

Amount of Each Disbursement this Period: 360.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Mailing Address 345 Buckland Hills Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement: Reimbursement - Supplies

Candidate Name: Category/Type:

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: SB17.27430
Date of Disbursement: 06 / 26 / 2008

Amount of Each Disbursement this Period: 24.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Mailing Address 345 Buckland Hills Drive

City Manchester State CT Zip Code 06040

Purpose of Disbursement: Reimbursement - Supplies

Candidate Name: Category/Type:

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Transaction ID: SB17.27431
Date of Disbursement: 06 / 26 / 2008

Amount of Each Disbursement this Period: 25.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ► 410.90

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Geoffrey R. Luxenberg

Transaction ID: SB17.27436

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Mailing Address 345 Buckland Hills Drive

Amount of Each Disbursement this Period

50.00

City State Zip Code
Manchester CT 06040

Purpose of Disbursement
Reimbursement - Cell Phone

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Marriott Hartford Downtown

Transaction ID: SB17.27337

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	1		2	0	0	8

Mailing Address 200 Columbus Boulevard

Amount of Each Disbursement this Period

23142.00

City State Zip Code
Hartford CT 06106

Purpose of Disbursement
Catering

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Marriott Hartford Downtown

Transaction ID: SB17.27358

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	8

Mailing Address 200 Columbus Boulevard

Amount of Each Disbursement this Period

448.50

City State Zip Code
Hartford CT 06106

Purpose of Disbursement
Catering

Category/ Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

23640.50

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Max at the Bushnell

Mailing Address 166 Capitol Avenue

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27335
Date of Disbursement

/

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Mitchell Development, LLC

Mailing Address P.O. Box 1235

City South Windsor State CT Zip Code 06074

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27354
Date of Disbursement

/

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
National Democratic Club

Mailing Address 30 Ivy Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Catering

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27363
Date of Disbursement

/

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Jennifer L. Pacquette	Transaction ID: SB17.27342 Date of Disbursement 05 / 03 / 2008
	Mailing Address 301 Wolcott Hill Road	Amount of Each Disbursement this Period 76.67
	City Wethersfield State CT Zip Code 06109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Reimbursement - Supplies 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) ▼

B.	Full Name (Last, First, Middle Initial) Jennifer L. Pacquette	Transaction ID: SB17.27411 Date of Disbursement 06 / 12 / 2008
	Mailing Address 301 Wolcott Hill Road	Amount of Each Disbursement this Period 1631.21
	City Wethersfield State CT Zip Code 06109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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) ▼

C.	Full Name (Last, First, Middle Initial) Jennifer L. Pacquette	Transaction ID: SB17.27412 Date of Disbursement 06 / 12 / 2008
	Mailing Address 301 Wolcott Hill Road	Amount of Each Disbursement this Period 1631.21
	City Wethersfield State CT Zip Code 06109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Salary 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)	3339.09
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
Peppercorn's Grill

Mailing Address P.O. Box 776

City Plainville State CT Zip Code 06062

Purpose of Disbursement

Political Meals

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27384

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

587.80

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Prospect Restaurant

Mailing Address 345 Prospect Avenue

City West Hartford State CT Zip Code 06105

Purpose of Disbursement

Catering

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27404

Date of Disbursement

06 / 08 / 2008

Amount of Each Disbursement this Period

475.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
The Board Room

Mailing Address 241 Main Street

City Hartford State CT Zip Code 06106

Purpose of Disbursement

Occupancy

Candidate Name

Category/Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27346

Date of Disbursement

05 / 03 / 2008

Amount of Each Disbursement this Period

530.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1592.80

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) The Board Room</p> <p>Mailing Address 241 Main Street</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Occupancy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27409</p> <p>Date of Disbursement 06 / 08 / 2008</p> <p>Amount of Each Disbursement this Period 530.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) The Board Room</p> <p>Mailing Address 241 Main Street</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Occupancy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27432</p> <p>Date of Disbursement 06 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 530.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) The Bushnell</p> <p>Mailing Address 166 Capitol Avenue</p> <p>City Hartford State CT Zip Code 06106</p> <p>Purpose of Disbursement Facility Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27339</p> <p>Date of Disbursement 05 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2168.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3228.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
The Bushnell

Mailing Address 166 Capitol Avenue

City Hartford State CT Zip Code 06106

Purpose of Disbursement
Facility Fee
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27362
Date of Disbursement

05 / 08 / 2008

Amount of Each Disbursement this Period

2168.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27453
Date of Disbursement

04 / 24 / 2008

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27454
Date of Disbursement

04 / 25 / 2008

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2178.00

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The Connecticut Bank and Trust Company	Transaction ID: SB17.27455 Date of Disbursement
	Mailing Address 7 Sycamore Street	<input type="text" value="04"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City Glastonbury State CT Zip Code 06033	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge	<input type="text" value="5.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼

B.	Full Name (Last, First, Middle Initial) The Connecticut Bank and Trust Company	Transaction ID: SB17.26857 Date of Disbursement
	Mailing Address 7 Sycamore Street	<input type="text" value="05"/> / <input type="text" value="05"/> / <input type="text" value="2008"/>
	City Glastonbury State CT Zip Code 06033	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge	<input type="text" value="10.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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) ▼

C.	Full Name (Last, First, Middle Initial) The Connecticut Bank and Trust Company	Transaction ID: SB17.27447 Date of Disbursement
	Mailing Address 7 Sycamore Street	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2008"/>
	City Glastonbury State CT Zip Code 06033	Amount of Each Disbursement this Period
	Purpose of Disbursement Service Charge	<input type="text" value="10.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	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)	<input type="text" value="25.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27443
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	6		2	0	8	

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27444
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	8	

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
The Connecticut Bank and Trust Company

Mailing Address 7 Sycamore Street

City Glastonbury State CT Zip Code 06033

Purpose of Disbursement
Service Charge
Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:
Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB17.27445
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	8		2	0	8	

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

15.00

TOTAL This Period (last page this line number only) ▶

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) The Ferris Group, LLC</p> <p>Mailing Address 1245 Farmington Avenue</p> <p>City West Hartford State CT Zip Code 06107</p> <p>Purpose of Disbursement Consulting Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27351</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3600.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) The Ferris Group, LLC</p> <p>Mailing Address 1245 Farmington Avenue</p> <p>City West Hartford State CT Zip Code 06107</p> <p>Purpose of Disbursement Event Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27372</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3613.32"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) The Hartford</p> <p>Mailing Address Hartford Plaza</p> <p>City Hartford State CT Zip Code 06103</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.27364</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="464.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) The Hartford Club	Transaction ID: SB17.27367 Date of Disbursement 05 / 18 / 2008
	Mailing Address 46 Prospect Street	Amount of Each Disbursement this Period 347.26
	City Hartford State CT Zip Code 06103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering	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) ▼

B.	Full Name (Last, First, Middle Initial) Twenty-first Century Group	Transaction ID: SB17.27410 Date of Disbursement 06 / 09 / 2008
	Mailing Address 434 New Jersey Avenue, S.E.	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Facility Fee	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) ▼

C.	Full Name (Last, First, Middle Initial) Twenty-first Century Group	Transaction ID: SB17.27435 Date of Disbursement 06 / 30 / 2008
	Mailing Address 434 New Jersey Avenue, S.E.	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Facility Fee	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)	▶	3347.26
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) U. S. Postmaster	Transaction ID: SB17.27349 Date of Disbursement 05 / 06 / 2008
	Mailing Address Ann Street	Amount of Each Disbursement this Period 410.00
	City Hartford State CT Zip Code 06103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Stamps 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) ▼

B.	Full Name (Last, First, Middle Initial) U. S. Postmaster	Transaction ID: SB17.27350 Date of Disbursement 05 / 06 / 2008
	Mailing Address Ann Street	Amount of Each Disbursement this Period 410.00
	City Hartford State CT Zip Code 06103	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Stamps 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) ▼

C.	Full Name (Last, First, Middle Initial) Venable LLP	Transaction ID: SB17.27418 Date of Disbursement 06 / 26 / 2008
	Mailing Address 575 7th Avenue NW	Amount of Each Disbursement this Period 3355.80
	City Washington State DC Zip Code 20004	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Catering 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)	4175.80
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Venable LLP <hr/> Mailing Address 575 7th Avenue NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Facility Fee Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27425 Date of Disbursement 06 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 75.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Vineyard Properties <hr/> Mailing Address 300 East River Drive <hr/> City East Hartford State CT Zip Code 06108 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27385 Date of Disbursement 05 / 31 / 2008 <hr/> Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Vineyard Properties <hr/> Mailing Address 300 East River Drive <hr/> City East Hartford State CT Zip Code 06108 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> 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) ▼	Transaction ID: SB17.27437 Date of Disbursement 06 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 4000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	8075.00
TOTAL This Period (last page this line number only) ▶	112631.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input checked="" type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) AIRCRAFT OWNERS AND PILOTS ASSOCIATION (POLITICAL ACTION COMMITTEE)</p> <p>Mailing Address 421 AVIATION WAY</p> <p>City FREDERICK State MD Zip Code 21701</p> <p>Purpose of Disbursement Return of Contributions</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20B.27468</p> <p>Date of Disbursement 06 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) CITIZENS FOR HOPE RESPONSIBILITY INDEPENDENCE & SERVICE PAC (CHRIS PAC)</p> <p>Mailing Address 607 14TH STREET NW SUITE 800</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement Return of Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20B.27506</p> <p>Date of Disbursement 06 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) MICROSOFT CORPORATION POLITICAL ACTION COMMITTEE</p> <p>Mailing Address 16011 NE 36TH WAY BOX 97017</p> <p>City REDMOND State WA Zip Code 98073</p> <p>Purpose of Disbursement Return of Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB20B.27510</p> <p>Date of Disbursement 06 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	11000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input checked="" type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) NEA FUND FOR CHILDREN AND PUBLIC EDUCATION; THE (FKA NE-APAC) Mailing Address 1201 16TH STREET NW #421 City WASHINGTON State DC Zip Code 20036 Purpose of Disbursement Return of Contribution 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) ▼	Transaction ID: SB20B.27470 Date of Disbursement 06 / 15 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE Mailing Address 51 MADISON AVENUE (910) City NEW YORK State NY Zip Code 10010 Purpose of Disbursement Return of Contribution 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) ▼	Transaction ID: SB20B.27471 Date of Disbursement 06 / 15 / 2008 Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) U.B.C. New England Regional Council of Carpenters C.L.I.-C. Mailing Address 427 Stillson Road City Fairfield State CT Zip Code 06824 Purpose of Disbursement Return of Contribution 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) ▼	Transaction ID: SB20B.27490 Date of Disbursement 06 / 15 / 2008 Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	8000.00
TOTAL This Period (last page this line number only) ▶	19000.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANDRE CARSON FOR CONGRESS

Mailing Address One North Capitol Street #211

City Indianapolis State IN Zip Code 46204

Purpose of Disbursement
Contribution

Candidate Name
ANDRE CARSON FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: IN District: 07

Transaction ID: SB21.27327
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
CAZAYOUX FOR CONGRESS

Mailing Address POB 3172

City Baton Rouge State LA Zip Code 70821

Purpose of Disbursement
Contribution

Candidate Name
CAZAYOUX FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: LA District: 06

Transaction ID: SB21.27325
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
CHILDERS FOR CONGRESS

Mailing Address PO BOX 177

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement
Contribution

Candidate Name
CHILDERS FOR CONGRESS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MS District: 01

Transaction ID: SB21.27329
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-CONTRIBUTIO-NS Mailing Address 430 S CAPITOL ST SE 2ND FLOOR City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement Transfer to National Party Committee 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) ▼ State: District:	Transaction ID: SB21.27386 Date of Disbursement 05 / 31 / 2008 Amount of Each Disbursement this Period 50000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Democratic State Central Committee - Fed. Account Mailing Address 380 Franklin Avenue City Hartford State CT Zip Code 06116 Purpose of Disbursement Transfer to State Party Committee 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) ▼ State: District:	Transaction ID: SB21.27331 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 2250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) FRIENDS OF JOE BACA Mailing Address 555 Capitol Mall Suite 1425 City Sacramento State CA Zip Code 95814 Purpose of Disbursement Contribution Candidate Name FRIENDS OF JOE BACA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 43	Transaction ID: SB21.27387 Date of Disbursement 06 / 03 / 2008 Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	54250.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
JOE GARCIA FOR CONGRESS

Transaction ID: SB21.27379

Date of Disbursement

Mailing Address 12930 SW 128 Street
Suite 102

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	4		2	0	0	8

City State Zip Code
Miami FL 33186

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

--

Candidate Name
JOE GARCIA FOR CONGRESS

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 25

B.

Full Name (Last, First, Middle Initial)
RAUL MARTINEZ FOR CONGRESS

Transaction ID: SB21.27382

Date of Disbursement

Mailing Address 700 WEST 76 STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

City State Zip Code
HIALEAH FL 33014

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Contribution

--

Candidate Name
RAUL MARTINEZ FOR CONGRESS

Category/
Type

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: FL District: 21

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

TOTAL This Period (last page this line number only) ►

64250.00
