

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Frank Kratovil for Congress

ADDRESS (number and street) 222 Main Sail Drive PO Box 518 Stevensville MD 21666 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00434936 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT MD 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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 10 / 01 / 2011 through M M / D D / Y Y Y Y 12 / 31 / 2011

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 Elaine Harrison

Signature of Treasurer Elaine Harrison [Electronically Filed] Date M M / D D / Y Y Y Y 01 / 26 / 2012

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

**Frank Kratovil for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2011 To: M M / D D / Y Y Y Y 12 / 31 / 2011

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	400.40
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	300.40
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	6674.52	88827.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	9947.65	12239.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	-3273.13	76588.16
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	20348.26	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

**Frank Kratovil for Congress**

Report Covering the Period: From:  /  /  To:  /  /

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	400.40
(iii) TOTAL of contributions from individuals ▶	0.00	400.40
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	400.40
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	9947.65	12239.30
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	8.22	65.17
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	9955.87	12704.87

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6674.52	88827.46
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	100.00
(b) Political Party Committees.....	0.00	351.00
(c) Other Political Committees (such as PACs).....	0.00	-351.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	100.00
21. OTHER DISBURSEMENTS .....	4000.00	3600.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	10674.52	92527.46

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	21066.91
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	9955.87
25. SUBTOTAL (add Line 23 and Line 24).....	31022.78
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10674.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	20348.26

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

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)  
**Frank Kratovil for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Squier Knapp Dunn Communications**

Mailing Address 511 2nd Street NE

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 9546.51

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2011

**Transaction ID : C7814916**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 9546.51

Media ad buys never used were refunded

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

Mailing Address PO Box 660720

City Dallas State TX Zip Code 75266-0720

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 494.31

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2011

**Transaction ID : C7814918**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 401.14

refund from verizon

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period  
 \_\_\_\_\_

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

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

\_\_\_\_\_ 9947.65

\_\_\_\_\_ 9947.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 13			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

**A. Advantage Self Storage**

Full Name (Last, First, Middle Initial)  
Mailing Address 1715 Piney Creek Rd

City Stevensville State MD Zip Code 21666

Purpose of Disbursement rent storage unit

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 15 / 2011

Amount of Each Disbursement this Period: 253.00

Transaction ID : D393974

Category/Type: 001

**B. Advantage Self Storage**

Full Name (Last, First, Middle Initial)  
Mailing Address 1715 Piney Creek Rd

City Stevensville State MD Zip Code 21666

Purpose of Disbursement rent storage unit

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 01 / 2011

Amount of Each Disbursement this Period: 253.00

Transaction ID : D393975

Category/Type: 001

**c. Advantage Self Storage**

Full Name (Last, First, Middle Initial)  
Mailing Address 1715 Piney Creek Rd

City Stevensville State MD Zip Code 21666

Purpose of Disbursement long term rent storage unit

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2011

Amount of Each Disbursement this Period: 2783.00

Transaction ID : D393976

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 3289.00

**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)	PAGE 7 OF 13			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

**A. Advantage Self Storage**

Full Name (Last, First, Middle Initial)  
Mailing Address 1715 Piney Creek Rd

City State Zip Code  
Stevensville MD 21666

Purpose of Disbursement  
rent storage unit

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
12 / 21 / 2011

Amount of Each Disbursement this Period  
253.00

Transaction ID : D393977

Category/Type: 001

**B. Authorize.net**

Full Name (Last, First, Middle Initial)  
Mailing Address CyberSource.com  
1295 Charleston Rd.

City State Zip Code  
Mountain View CA 94043

Purpose of Disbursement  
credit card gateway minimum fee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 04 / 2011

Amount of Each Disbursement this Period  
20.00

Transaction ID : D393978

Category/Type: 001

**c. Authorize.net**

Full Name (Last, First, Middle Initial)  
Mailing Address CyberSource.com  
1295 Charleston Rd.

City State Zip Code  
Mountain View CA 94043

Purpose of Disbursement  
credit card gateway minimum fee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
11 / 04 / 2011

Amount of Each Disbursement this Period  
20.00

Transaction ID : D393979

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 293.00

**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)	PAGE 8 OF 13			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Authorize.net</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2011
Mailing Address CyberSource.com 1295 Charleston Rd.		Amount of Each Disbursement this Period 20.00 <b>Transaction ID : D393980</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement credit card gateway minimum fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Main Street Business Solutions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 102 Chester Village		Amount of Each Disbursement this Period 416.25 <b>Transaction ID : D393982</b>
City Chester	State MD	
Zip Code 21619	Purpose of Disbursement compliance services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Sage Payment Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1750 Old Meadow Road #300		Amount of Each Disbursement this Period 32.00 <b>Transaction ID : D393984</b>
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	468.25
<b>TOTAL</b> 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)		PAGE 9 OF 13	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sage Payment Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 1750 Old Meadow Road #300		Amount of Each Disbursement this Period 32.00
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement credit card processor minimum	Transaction ID : D393985
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sage Payment Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 1750 Old Meadow Road #300		Amount of Each Disbursement this Period 131.80
City McLean	State VA	
Zip Code 22102	Purpose of Disbursement credit card processor minimum and yearly compliance	Transaction ID : D393986
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 8168 Elliott Rd		Amount of Each Disbursement this Period 132.44
City Easton	State MD	
Zip Code 21601	Purpose of Disbursement office supply	Transaction ID : D393988
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	296.24
<b>TOTAL</b> 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)	PAGE 10 OF 13		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 102.29 <b>Transaction ID : D393989</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 134.64 <b>Transaction ID : D393990</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 126.10 <b>Transaction ID : D393991</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	363.03
<b>TOTAL</b> 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)	PAGE 11 OF 13		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 124.60 <b>Transaction ID : D393992</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 134.75 <b>Transaction ID : D393993</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 129.00 <b>Transaction ID : D393994</b>
City Tucson	State AZ	
Zip Code 85731-7120	Purpose of Disbursement cell service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	388.35
<b>TOTAL</b> 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)	PAGE 12 OF 13			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 125.90 <b>Transaction ID : D393995</b>
City Tucson	State AZ	
Purpose of Disbursement cell service		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address PO Box 17120		Amount of Each Disbursement this Period 134.75 <b>Transaction ID : D393996</b>
City Tucson	State AZ	
Purpose of Disbursement cell service		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Wired for Change/Salsa Labs</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2011
Mailing Address 1700 Connecticut Ave. NW, Suite 40		Amount of Each Disbursement this Period 1272.00 <b>Transaction ID : D393987</b>
City Washington	State DC	
Purpose of Disbursement final on website		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1532.65
<b>TOTAL</b> This Period (last page this line number only).....	6630.52

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 13	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Frank Kratovil for Congress**

Full Name (Last, First, Middle Initial) <b>A. Friends of Frank Kratovil</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 04 / 2011</b>
Mailing Address <b>222 Main Sail</b>		Amount of Each Disbursement this Period <b>4000.00</b> <b>Transaction ID : D393981</b>
City <b>Stevensville</b> State <b>MD</b> Zip Code <b>21666</b>	Purpose of Disbursement contribution Candidate Name <b>011</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement 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>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>4000.00</b>