

**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

Johnson for Congress Committee

ADDRESS (number and street)  
▼

P. O. Box 1986

☐Check if different  
than previously  
reported. (ACC)

New Britain

CT

06050

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00145607

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

CT

05

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2006

through

03

31

2006

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

John Eveleth

Signature of Treasurer

Electronically Filed by John Eveleth

Date

06

15

2006

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

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 6

	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)).....	436373.90	1711639.32
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	7000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	436373.90	1704639.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	161468.79	384671.60
(b) Total Offsets to Operating Expenditures (from Line 14).....	649.57	949.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	160819.22	383721.76
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2471348.15	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

Johnson for Congress Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	6

**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).....

219628.90

731623.72

(ii) Unitemized.....

15645.00

42783.00

(iii) TOTAL of contributions

235273.90

774406.72

from individuals..... ▶

0.00

394.00

(b) Political Party Committees.....

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

201100.00

936838.60

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

436373.90

1711639.32

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

0.00

0.00

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

649.57

949.84

## 15. OTHER RECEIPTS

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

11943.19

22651.74

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

448966.66

1735240.90

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	161468.79	384671.60
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	1000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	6000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	7000.00
21. OTHER DISBURSEMENTS.....	0.00	43895.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	161468.79	435566.60

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2183850.28
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	448966.66
25. SUBTOTAL (add Line 23 and Line 24).....	2632816.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	161468.79
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2471348.15

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

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

FOR LINE NUMBER: PAGE 5 / 218

(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)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Daniel Adams  
Mailing Address 160 Morgan Ave.

City State Zip Code  
East Haven CT 06512

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Protein Sciences

Occupation  
President

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32931

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Patrick Albergro  
Mailing Address 3 Anja Drive

City State Zip Code  
Simsbury CT 06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32859

Amount of Each Receipt this Period

1250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Marcia Alcorn  
Mailing Address 22 Deep Brook Harbor

City State Zip Code  
Suffield CT 06078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60405.C33270

Amount of Each Receipt this Period

100.00

Receipt

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

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

1850.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Seyed H. Aleali  
Mailing Address 4699 Main Street

City State Zip Code  
Bridgeport CT 06606-1830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33435

Amount of Each Receipt this Period

200.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Donald Alexander  
Mailing Address 1333 New Hampshire Ave., NW

City State Zip Code  
Washington DC 20036-1564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Akin, Gump et al

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 60405.C33288

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Kenneth Auman  
Mailing Address 420 E. 58th St., #22A

City State Zip Code  
New York NY 10022-2348

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Hartford

Occupation  
Sr. VP & Chief Info. Officer

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33337

Amount of Each Receipt this Period

500.00

Receipt

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

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Duane Austin Mailing Address 51 Orchard Farms Ln City State Zip Code Avon CT 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32850 Amount of Each Receipt this Period 1250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> 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. <b>C</b> Name of Employer The Hartford Occupation Insurance Executive Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33361 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) George Aylward Mailing Address One American Road City State Zip Code Hartford CT 06102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Companies Occupation Sr. VP Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33068 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Samuel Bailey

Mailing Address 211 Mountain Spring Rd.

City

Farmington

State

CT

Zip Code

06032-1614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Richardson

Occupation  
Principal

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

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

Transaction ID: 60405.C33206

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Leo Barbaro

Mailing Address 92 Leatherman Road

City

Guilford

State

CT

Zip Code

06437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anthem BCBS

Occupation  
Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32912

Amount of Each Receipt this Period

250.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Toshia Barnett

Mailing Address 96 Bittersweet Lane

City

South Glastonbury

State

CT

Zip Code

06073-2400

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: 60317.C32869

Amount of Each Receipt this Period

1900.00

Receipt

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

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

3150.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Anthony Barri

Mailing Address 100 Sheffield St

City State Zip Code  
 Old Saybrook CT 06475

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Staff of constitution Eye  
Surg

Occupation

Ophthalmologist

Receipt For: 2006

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32838

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Lisa Bassi

Mailing Address 1001 Mohawk Trail

City State Zip Code  
 North Adams MA 01247-2948

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix

Occupation

Insurance Executive

Receipt For: 2006

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C33078

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Janet Bates

Mailing Address 74 Tanner Hill Road

City State Zip Code  
 New Preston CT 06777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
unemployed

Occupation

Unemployed

Receipt For: 2006

Election Cycle-to-Date ▼

☒ Primary ☐ General  
☐ Other (specify) ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33433

Amount of Each Receipt this Period

200.00

Receipt

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

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

2200.00

**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 10 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Frank Battafarano  
Mailing Address 2700 Little Hills Lane

City State Zip Code  
Anchorage KY 40223

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kindred Healthcare

Occupation  
Pres. Hosp. Div.

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33014

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Andrew Bazos  
Mailing Address 188 Northop Street

City State Zip Code  
Bridgewater CT 06752

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 60317.C32946

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
David Becker  
Mailing Address PO Box 560398

City State Zip Code  
Charlotte NC 28256

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hartford Financial Serv-  
ices

Occupation  
Division Manager

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33328

Amount of Each Receipt this Period

250.00

Receipt

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

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 11 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Gerald Becker Mailing Address 57 Jeremiahs Way City State Zip Code South Glastonbury CT 06073 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Orthopedic Assn, of Hartford Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1900.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32874 Amount of Each Receipt this Period 1900.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Beggins Mailing Address 59 Mill Stone Drive City State Zip Code Guilford CT 06437 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32834 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) David Benfer Mailing Address 5 Selden Ave City State Zip Code Branford CT 06405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer St Raphael Hospital Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32926 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3400.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Alan Bennett

Mailing Address 48 Fieldbrook Rd.

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32997

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Jonathan R. Bennett

Mailing Address 130 Silver Creek Drive

City State Zip Code  
 Suffield CT 06078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Finance Services

Occupation  
Executive VP

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33343

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Joseph Bentivegna

Mailing Address 817 Mountain Laurel Rd

City State Zip Code  
 Fairfield CT 06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 60317.C32828

Amount of Each Receipt this Period

750.00

Receipt

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

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

John Bermel

Mailing Address 237 Old Farms

City State Zip Code  
 Simsbury CT 06070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Finance Officer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32976

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mark Bertolini

Mailing Address 11 Robkins Rd.

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 60317.C32998

Amount of Each Receipt this Period

1500.00

Receipt

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

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

Victoria Biondi

Mailing Address 1760 Perkins Street

City State Zip Code  
 Bristol CT 06010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Physicians for Womens Health

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33436

Amount of Each Receipt this Period

200.00

Receipt

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

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

2200.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Samuel Blades

Mailing Address 74 Deer Run

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33345

Amount of Each Receipt this Period

500.00

Receipt

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

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

Andre Blaszczyński

Mailing Address 8 Luis Road

City State Zip Code  
 Kensington CT 06037-3933

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tunxis Community College

Occupation  
Professor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33430

Amount of Each Receipt this Period

200.00

Receipt

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

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

John Bolton

Mailing Address 62 Running Brook Lane

City State Zip Code  
 New Canaan CT 06840

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
SVP Corp. Communications

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33087

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1700.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Peter Bonachea

Mailing Address 187 Westshore Road

City State Zip Code  
New Preston CT 06777

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Real Estate Manager

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33412

Amount of Each Receipt this Period

100.00

Receipt

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

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

John Booth

Mailing Address P.O. Box 25, 182 Whites Wood Road

City State Zip Code  
Litchfield CT 06759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Coleman, Swenson & Booth

Occupation  
Chairman

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33011

Amount of Each Receipt this Period

1700.00

Receipt

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

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

Marna Borgstrom

Mailing Address 458 Three Mile Course

City State Zip Code  
Guilford CT 06437

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Yale New Haven Hospital

Occupation  
President/CEO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: 60317.C32811

Amount of Each Receipt this Period

500.00

Receipt

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

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

2300.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Kenneth Boynton

Mailing Address 20 Gerald Drive

City State Zip Code  
 Vernon Rockville CT 06066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boynston Construction

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33468

Amount of Each Receipt this Period

200.00

Receipt

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

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

Patrick Braham

Mailing Address 317 McClintock Street

City State Zip Code  
 New Britain CT 06053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33428

Amount of Each Receipt this Period

200.00

Receipt

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

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

John Bridge

Mailing Address 48 Juniper Hill Road

City State Zip Code  
 Somers CT 06071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
head of Business Development

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33049

Amount of Each Receipt this Period

500.00

Receipt

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

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

900.00

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



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

FOR LINE NUMBER: PAGE 17 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence Brunoli Mailing Address 524 Antelope Trail City Shelton State CT Zip Code 06484 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Lawrence Brunoli Inc. Occupation Contractor Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 650.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60405.C33434 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">200.00</td> </tr> </table> Receipt <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	3		3	1		2	0	0	6	200.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		3	1		2	0	0	6																							
200.00																																
<b>B.</b> Full Name (Last, First, Middle Initial) Katherine Brush Mailing Address P.O. Box 2546 City New Preston State CT Zip Code 06777-0546 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60405.C33283 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">400.00</td> </tr> </table> Receipt <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	3		2	2		2	0	0	6	400.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	3		2	2		2	0	0	6																							
400.00																																
<b>C.</b> Full Name (Last, First, Middle Initial) James Buccheri Mailing Address 37 Southborough Road City Southington State CT Zip Code 06489 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American BCBS Occupation Management Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 60317.C32911 Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table> Receipt <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	2		0	7		2	0	0	6	250.00									
M	M	/	D	D	/	Y	Y	Y	Y																							
0	2		0	7		2	0	0	6																							
250.00																																

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bonnie Burr Mailing Address 27 Dingle Brook Road City State Zip Code Brookfield CT 06804 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Connecticut Farm Bureau Occupation Government Relations Director Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33414 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Peter Byeff Mailing Address 90 Copper Ridge City State Zip Code Southington CT 06489 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3900.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32947 Amount of Each Receipt this Period 1900.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Peter Byeff Mailing Address 90 Copper Ridge City State Zip Code Southington CT 06489 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32948 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2100.00**

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

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

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

FOR LINE NUMBER: PAGE 19 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Craig Callen		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 151 Farmington Ave.		<b>Transaction ID:</b> 60317.C32979
City Hartford	State CT	Zip Code 06156
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer AETNA	Occupation Sr. Vice President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Andrew Caputo		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 180 Cider Brook Road		<b>Transaction ID:</b> 60317.C32866
City Avon	State CT	Zip Code 06001-2847
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00
Name of Employer Orthopedic Assn. of Hartford	Occupation Surgeon	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Carr		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 157 Carriage Crossing		<b>Transaction ID:</b> 60317.C32934
City Middletown	State CT	Zip Code 06457
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer requested	Occupation Requested	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

3900.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
William Casazza  
Mailing Address 229 Cold Spring Road

City State Zip Code  
Avon CT 06001-4014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32981

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Jayne Chambers  
Mailing Address 1256 Kensington Rd.

City State Zip Code  
McLean VA 22101

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Federation of Am. Hosp.

Occupation  
VP Leg. & Pol. Affairs

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33183

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Patrick Charmel  
Mailing Address 82 Eramo Terrace

City State Zip Code  
Hamden CT 06518

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Griffin Hospital

Occupation  
President & CEO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32814

Amount of Each Receipt this Period

500.00

Receipt

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Martha Cheshire Mailing Address 22 Mountain Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Homemaker Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33208 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Cheshire Mailing Address 22 Mountain Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Consultant Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33207 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Chu Mailing Address 99 Norwood Road City W Hartford State CT Zip Code 06117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Sr. VP Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33350 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**4700.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Clapp Mailing Address 31 Howland Road City State Zip Code W Hartford CT 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33336 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Katherine Cody Mailing Address 125 Country Lane City State Zip Code South Glastonbury CT 06073 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Companies Occupation Chief Accounting Officer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2006 <b>Transaction ID:</b> 60317.C33058 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Howard Cohen Mailing Address 10405 Sandringham Court City State Zip Code Potomac MD 20854 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer HC Associates Inc. Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 15 / 2006 <b>Transaction ID:</b> 60317.C33184 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Seymour Cohen

Mailing Address 13A Dogwood Lane

City State Zip Code  
 Westport CT 06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CSA

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 60317.C32789

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Edward Collins

Mailing Address 76 Bellevue Street

City State Zip Code  
 Willimantic CT 06226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60405.C33210

Amount of Each Receipt this Period

500.00

Receipt

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

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

Michael Concannon

Mailing Address 32 Manzoni Farm Drive

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Financial Services

Occupation  
insurance management

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33352

Amount of Each Receipt this Period

500.00

Receipt

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

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Frances Connelly  
 Mailing Address 272 North Main Street

City State Zip Code  
 Suffield CT 06078

FEC ID number of contributing federal political committee.

C

Name of Employer  
HomemakerOccupation  
Homemaker

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33419

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** 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  
HartfordOccupation  
Portfolio Manager

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33348

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 John Cullen  
 Mailing Address 31 Prospect Place

City State Zip Code  
 Bristol CT 06010

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hospital of St. RaphaelOccupation  
CEO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

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

Transaction ID: 60317.C32808

Amount of Each Receipt this Period

250.00

Receipt

☐ 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**

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

FOR LINE NUMBER: PAGE 25 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Christopher Dadlez  
Mailing Address 46 Old Stone Crossing

City State Zip Code  
W Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
St. Francis Hospital

Occupation  
President/CEO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 60317.C32921

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Lois Dalen  
Mailing Address 3701 N. Melrose Drive

City State Zip Code  
Farmington NM 87401-4008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: 60317.C32783

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
William H. Davison  
Mailing Address 55 Highland Ridge Drive

City State Zip Code  
Suffield CT 06078-9752

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford

Occupation  
Investment Management

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33339

Amount of Each Receipt this Period

500.00

Receipt

☐ 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**

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

FOR LINE NUMBER: PAGE 26 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ann Dawson Mailing Address 88 Ten Acre Road City State Zip Code New Britain CT 06052 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer N Britain Board Of Education P Occupation Teacher Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33031 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ann De Raismes Mailing Address 58 Massaco Street City State Zip Code Simsbury CT 06070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Life, Inc. Occupation Sr. Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33323 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jane Demaio Mailing Address 148 Dug Road City State Zip Code South Glastonbury CT 06073-2001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation VP Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33050 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Gregory DeManche  
 Mailing Address 49 W. Main Street

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 DeManche McChristian, LLC

Occupation  
 Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33007

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Russell Dickhart  
 Mailing Address 80 Goodwin Circle

City State Zip Code  
 Hartford CT 06105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 AETNA

Occupation  
 VP

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33088

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Burke Doar  
 Mailing Address 3 Johnson Avenue

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Trumpf Inc.

Occupation  
 VP Sales

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

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

Transaction ID: 60317.C32817

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2500.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Burke Doar		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 3 Johnson Avenue		<b>Transaction ID:</b> 60317.C33133
City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Trumpf Inc.	Occupation VP Sales	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) John Doar		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address unknown		<b>Transaction ID:</b> 60317.C33136
City State Zip Code New Britain CT 06052	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Employed	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Michael Doar		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address 2219 Clinton Place		<b>Transaction ID:</b> 60405.C33205
City State Zip Code Rockford IL 61103	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer HWW Companies, Inc.	Occupation Businessman	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

4000.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Sara Doar

Mailing Address 198 Tripp Road

City State Zip Code  
 Millerton NY 12546

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33131

Amount of Each Receipt this Period

500.00

Receipt

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

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

Scott Dolin

Mailing Address 140 Pioneer Drive

City State Zip Code  
 W Hartford CT 06117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hartford Eye Physicians,  
PC

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32824

Amount of Each Receipt this Period

500.00

Receipt

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

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

Edward Dowling

Mailing Address 110 Hammonasset Meadows

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Yale New Haven Hospital

Occupation  
Sr. Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32809

Amount of Each Receipt this Period

250.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Vincent Dowling

Mailing Address unknown

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33135

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Dana Drago

Mailing Address 77 Far Hills

City

State

Zip Code

Avon

CT

06001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Hartford

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33330

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Thomas Dugdale

Mailing Address 135 Steep Hollow Drive

City

State

Zip Code

Glastonbury

CT

06033-4180

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Orthopedic Assn. of Hart-  
ford

Occupation  
Orthopedic Surgeon

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: 60317.C32868

Amount of Each Receipt this Period

1900.00

Receipt

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

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

3150.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Michael J. Dury

Mailing Address 235 East River Drive, Apt. 1305

City State Zip Code  
 East Hartford CT 06108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Finance Services

Occupation  
Insurance Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33342

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Martin Edwards

Mailing Address 63 Saddle Ridge Road

City State Zip Code  
 Glastonbury CT 06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1062.50

Date of Receipt

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

Transaction ID: 60317.C32843

Amount of Each Receipt this Period

1062.50

Receipt

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

Full Name (Last, First, Middle Initial)

C. Norman Elia

Mailing Address 520 East 72nd Street 11-A

City State Zip Code  
 New York NY 10021-4854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33424

Amount of Each Receipt this Period

200.00

Receipt

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

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

1762.50

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

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

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

FOR LINE NUMBER: PAGE 32 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Patrice Ellis		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address 15 Country Club Road		<b>Transaction ID:</b> 60405.C33280
City South Glastonbury	State CT	Zip Code 06073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Hartford Financial Services	Occupation Sr. VP	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Peter Ellis		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 5 Sweet Water Lane		<b>Transaction ID:</b> 60317.C33005
City Pittsburgh	State PA	Zip Code 15238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer UPMC Cancer Ctrs.	Occupation Oncologist	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Brian Ellsworth		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 130 Brainard Hill Road		<b>Transaction ID:</b> 60317.C32924
City Higganum	State CT	Zip Code 06441-4069
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CT Association for Home Care	Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) David Emmel Mailing Address 28 Henderson Dr City Avon State CT Zip Code 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1700.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32860 Amount of Each Receipt this Period 1500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Faherty Mailing Address 36 Clark Road City Port Jervis State NY Zip Code 12771 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer PSIMEDICA Occupation CIO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33219 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Francis Falck Mailing Address 91 Montauk Ave City Stonington State CT Zip Code 06378 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 750.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32829 Amount of Each Receipt this Period 750.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**3250.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

John Farley

Mailing Address 43 Fernwood Road

City

W Hartford

State

CT

Zip Code

06119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mallocamp Sage LLP

Occupation

Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33126

Amount of Each Receipt this Period

200.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Patricia Farrell

Mailing Address 1149 Kettle Pond Lane

City

Great Falls

State

VA

Zip Code

22066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation

Decorator

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32973

Amount of Each Receipt this Period

500.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Robert Featherstone

Mailing Address 67 Holmes Road

City

Ridgefield

State

CT

Zip Code

06877-4302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32969

Amount of Each Receipt this Period

35.00

Receipt

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

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

735.00

**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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Featherstone Mailing Address 67 Holmes Road City State Zip Code Ridgefield CT 06877-4302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33249 Amount of Each Receipt this Period 35.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Austin Feeney Mailing Address 87 Perkins Road City State Zip Code Greenwich CT 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Orthodontist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33278 Amount of Each Receipt this Period 200.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Pamela W. Ferrigno Mailing Address 37 Cambridge Crossing City State Zip Code Avon CT 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Sunlight Construction Occupation Comptroller Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33478 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1235.00

**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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence Fiano		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 266 Boston Turnpike		<b>Transaction ID:</b> 60405.C33474
City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Fiano Dev. & Builders	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence Fiano		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 266 Boston Turnpike		<b>Transaction ID:</b> 60405.C33472
City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Fiano Dev. & Builders	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mark Fiano		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 19 Lucks Way		<b>Transaction ID:</b> 60405.C33470
City State Zip Code Bolton CT 06043	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer ING Financial Partners, Inc.	Occupation Investment Advisor Rep	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

**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)  
or each category of the  
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FOR LINE NUMBER: PAGE 37 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Thomas Fise  
Mailing Address 1203 Captains Court

City State Zip Code  
Towson MD 21286

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60405.C33211

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Amy Fisher  
Mailing Address 126 Mountain Road

City State Zip Code  
Redding CT 06896-2713

FEC ID number of contributing federal political committee.

C

Name of Employer  
The Phoenix CompanyOccupation  
SVP Institutional

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33084

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Bradley Fluegel  
Mailing Address 100 Trumbull St., Apt 303

City State Zip Code  
Hartford CT 06103

FEC ID number of contributing federal political committee.

C

Name of Employer  
AETNAOccupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33085

Amount of Each Receipt this Period

250.00

Receipt

☐ 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)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

James Foreman

Mailing Address 24 Little Fox Lane

City State Zip Code  
 Westport CT 06880

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Exec. Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60405.C33204

Amount of Each Receipt this Period

500.00

Receipt

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

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

Carol Fortier

Mailing Address 71 Pheasant Run

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32854

Amount of Each Receipt this Period

1250.00

Receipt

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

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

Mary Fox

Mailing Address 24 Oak Bluff

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Insurance Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32993

Amount of Each Receipt this Period

500.00

Receipt

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

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

2250.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Anthony Francoline  
 Mailing Address 43 West Main Street

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer  
Avonridge Inc.Occupation  
Homebuilder

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33475

Amount of Each Receipt this Period

200.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Stephen Frayne  
 Mailing Address 113 Hurds Hill Road

City State Zip Code  
 Woodbury CT 06798-4016

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT Hospital Assoc.Occupation  
SVP Health Policy

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32806

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Joel Freedman  
 Mailing Address 213 Tryon Street

City State Zip Code  
 S. Glastonbury CT 06073

FEC ID number of contributing federal political committee.

C

Name of Employer  
The HartfordOccupation  
Sr. VP

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33344

Amount of Each Receipt this Period

500.00

Receipt

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

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Furek Mailing Address 1370 Cutler Court City State Zip Code Marco Island FL 34145 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33440 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Fusari Mailing Address 8 Fencove Court City State Zip Code Old Saybrook CT 06457 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Real Est.Serv. of CT Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33469 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) David Fusco Mailing Address 30 Summit Drive City State Zip Code Durham CT 06422 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32915 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Daniel Gagnon  
Mailing Address 100 Randy Lane

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gagnon Homes

Occupation  
President

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33466

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Martin Gavin  
Mailing Address 2 Saddle Crossing

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Charter Oak Trust

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: 60317.C32929

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
David Gencarelli  
Mailing Address 410 3rd Street SE 2

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

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

Transaction ID: 60405.C33295

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Geraci Mailing Address 10 Stonemeadow Dr City State Zip Code Westwood MA 02090 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Investment Plans Occupation President/CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33074 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) James Geyer Mailing Address 20 Reed Drive City State Zip Code Manchester CT 06040 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33045 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Giamalis Mailing Address 5 Jordan Lane City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Financial Services Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33354 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mitchell Gilbert Mailing Address 396 Old Mountain Road City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32845 Amount of Each Receipt this Period 1100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ruthann Gilliland Mailing Address 477 Main Street City Monroe State CT Zip Code 06468 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Beacon Financial Occupation Registered Rep Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32945 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Larry Glasscock Mailing Address 7837 Morningside Lane City Indianapolis State IN Zip Code 46240 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Anthem Blue Cross Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32916 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2350.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ann Glover

Mailing Address 12 School House Lane

City State Zip Code  
Simsbury CT 06070

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Hartford

Occupation  
Marketing & Corp. Rel. Exec

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60405.C33332

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Stephen Gresham

Mailing Address 49 Pent Rd., PO Box 1307

City State Zip Code  
Madison CT 06443

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Phoenix Investments

Occupation  
Executive VP

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 08 / 2006

Transaction ID: 60317.C33059

Amount of Each Receipt this Period

300.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Nelson Griebel

Mailing Address 7 Caryn Lane

City State Zip Code  
Simsbury CT 06089

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metro Hartford Regional  
Econom

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 15 / 2006

Transaction ID: 60317.C32964

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Marc Grodman Mailing Address PO Box 309, Road 1 City State Zip Code Califon NJ 07830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33264 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mark S. Gurevitz Mailing Address 26 Copper Kettle Road City State Zip Code Trumbull CT 06611 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Occupation Insurance Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33338 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Nedenia Hartley Mailing Address 870 UN Plaza City State Zip Code New York NY 10017 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Actress Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33442 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2000.00**

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

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

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

FOR LINE NUMBER: PAGE 46 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

R. Christopher Hartley

Mailing Address 11 Stiles Court

City State Zip Code  
 South Windsor CT 06074

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Saint Francis Hospital

Occupation  
Senior VP

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32919

Amount of Each Receipt this Period

250.00

Receipt

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

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

Patricia Hassett

Mailing Address 4 Huyler Ave

City State Zip Code  
 Tenafly NY 07670

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Vice President and COS Assiste

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33046

Amount of Each Receipt this Period

500.00

Receipt

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

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

Michael Haylon

Mailing Address 26 Clark Dr

City State Zip Code  
 West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix Mutual Life Insur-  
ance

Occupation  
CFO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C33075

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Christopher Healy

Mailing Address 27 Dorchester Road

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 07 2006

Transaction ID: 60317.C32923

Amount of Each Receipt this Period

500.00

Receipt

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

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

Christopher Healy

Mailing Address 27 Dorchester Road

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 01 2006

Transaction ID: 60317.C33023

Amount of Each Receipt this Period

100.00

Receipt

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

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

Gayle Heil

Mailing Address 110 Lower Road

City State Zip Code  
Guilford CT 06437

FEC ID number of contributing federal political committee.

C

Name of Employer  
Yale New Haven HospitalOccupation  
Executive VP

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 07 2006

Transaction ID: 60317.C32810

Amount of Each Receipt this Period

250.00

Receipt

☐ 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**

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

FOR LINE NUMBER: PAGE 48 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Denise Henry

Mailing Address 7400 Park Terrace Drive

City State Zip Code  
 Alexandria VA 22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32971

Amount of Each Receipt this Period

1100.00

Receipt

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

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

Denise Henry

Mailing Address 7400 Park Terrace Drive

City State Zip Code  
 Alexandria VA 22307

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32972

Amount of Each Receipt this Period

2100.00

Receipt

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

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

Jeffrey Hertz

Mailing Address 79 Wawecus Street

City State Zip Code  
 Norwich CT 06360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32848

Amount of Each Receipt this Period

1250.00

Receipt

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

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

4450.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lucile Hicks Mailing Address 5 Wildwood Road City State Zip Code Wayland MA 01778-2121 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation retired MA Senator Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33421 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) David Hill Mailing Address 527 Mountain Road City State Zip Code W Hartford CT 06117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Ophthalmologist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1062.50		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32842 Amount of Each Receipt this Period 1062.50 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Timothy Holt Mailing Address 111 Fallview Drive City State Zip Code Glastonbury CT 06033-4197 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Head of Investments Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32980 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**2162.50**

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

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

FOR LINE NUMBER: PAGE 50 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Calvin Hudson Mailing Address 166 Ethan Drive City Windsor State CT Zip Code 06095-1670 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33326 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Hunt Mailing Address 130 Mallard Drive City Avon State CT Zip Code 06001-4562 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 03 / 08 / 2006 <b>Transaction ID:</b> 60317.C33041 Amount of Each Receipt this Period 150.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) James Iacobellis Mailing Address 114 Steep Hollow Lane City Manchester State CT Zip Code 06040 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32804 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) John Intravia Mailing Address unknown City State Zip Code FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32821 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Charlyn Iovino Mailing Address 1823 Solitaire Lane City State Zip Code McLean VA 22101 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AETNA lobbyist/attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33482 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jennifer Jackson Mailing Address 15 Jenda Way City State Zip Code Madison CT 06443-1780 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation CT Hospital Assoc. Gen Csl, VP Clin Ser Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32805 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Martin Jackson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 3 Spartan Circle		<b>Transaction ID:</b> 60317.C33016
City Camp Hill	State PA	Zip Code 17011
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Select Medical Corp	Occupation Senior VP, CFO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Carl Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 75 Mooreland Road		<b>Transaction ID:</b> 60405.C33439
City Kensington	State CT	Zip Code 06037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The Berlin Steel Construc- tion	Occupation Businessman	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) David M. Johnson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 18 Westwood Road		<b>Transaction ID:</b> 60405.C33347
City W Hartford	State CT	Zip Code 06117-2252
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Hartford	Occupation CFO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Thomas S. Johnston

Mailing Address 2 Atwater Terrace

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Hartford Fin. Services

Occupation  
Sr. VP & Chief Actuary

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60405.C33353

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 62 Cardinal Drive

City State Zip Code  
Guilford CT 06437

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Central CT Health Alliance

Occupation  
Director, Community Relations

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
02 / 23 / 2006

Transaction ID: 60317.C32999

Amount of Each Receipt this Period

200.00

Receipt

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

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

Mailing Address 4545 N. Glebe Rd.

City State Zip Code  
Arlington VA 22207-4848

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Health Ins. Assoc. of Ame-  
rica

Occupation  
Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60405.C33447

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1700.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Kalen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 11 Parker Road		<b>Transaction ID:</b> 60405.C33325
City Avon	State CT	Zip Code 06001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Hartford	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Jeffrey Kaplan		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 12 Rustic Lane		<b>Transaction ID:</b> 60317.C32875
City Westport	State CT	Zip Code 06880
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Mitchell Katcher		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 119 Haviland Road		<b>Transaction ID:</b> 60317.C33072
City Stamford	State CT	Zip Code 06903
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Phoenix	Occupation Sr. VP	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

3250.00

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

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

FOR LINE NUMBER: PAGE 55 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Kaufman Mailing Address 250 Beacon St., Unit 2 City State Zip Code Boston MA 02116 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Dutko Group Partner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33146 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Kim Keck Mailing Address 3 Buena Vista Road City State Zip Code W Hartford CT 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation AETNA Chief of Staff Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33051 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Joseph Kelleher Mailing Address 6 Spruce Lane City State Zip Code Weatogue CT 06089-9401 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Phoenix Sr. VP Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33081 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2000.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 56 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Kelley Mailing Address 49 Rosemary Lane City South Windsor State CT Zip Code 06074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer RSK-Kelco Inc Occupation Builder/Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33471 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Frank Kelly Mailing Address PO Box 144 City Bridgewater State CT Zip Code 06752-0144 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Danbury Hospital Occupation President/CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32815 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Charles Kime Mailing Address 3 Langley Park Farmington, CT 06032 City State Zip Code FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Orthopedic Assoc. of Hartford Occupation spine surgeon Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1900.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32873 Amount of Each Receipt this Period 1900.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**3100.00**

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



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

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

FOR LINE NUMBER: PAGE 57 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin Kinsella		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 87 Woodrow Street		<b>Transaction ID:</b> 60317.C33039
City West Hartford	State CT	Zip Code 06107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Hartford Hospital	Occupation Vice President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b> Full Name (Last, First, Middle Initial) Matthew Kirk		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 1755 S Street, NW, Apt. 8		<b>Transaction ID:</b> 60405.C33324
City Washington	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer The Hartford	Occupation VP - Federal Affairs	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Roger Klene		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 37 Mountain Road		<b>Transaction ID:</b> 60317.C33042
City Farmington	State CT	Zip Code 06032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mott Corporation	Occupation President & CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	
		Receipt <input type="checkbox"/> 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**

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

FOR LINE NUMBER: PAGE 58 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Robert Klimek

Mailing Address 101 Cove Rd

City State Zip Code  
 Lyme CT 06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60317.C32877

Amount of Each Receipt this Period

400.00

Receipt

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

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

Robert Klimek

Mailing Address 101 Cove Rd

City State Zip Code  
 Lyme CT 06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 60317.C32878

Amount of Each Receipt this Period

2100.00

Receipt

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

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

Gregor Koobatian

Mailing Address 188 Devonshire Lane

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Middlesex Gastroenterology  
Ass

Occupation  
Partner - physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32822

Amount of Each Receipt this Period

500.00

Receipt

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

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 59 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Jay A. Kossman  
Mailing Address 26 Turtle Bay Drive

City State Zip Code  
Branford CT 06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Healthcare Productivity  
Soluti

Occupation  
Consultant

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32944

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Caroline Koziatsek  
Mailing Address 27 Hill Top Road

City State Zip Code  
New Haven CT 06513

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wellpoint

Occupation  
VP of HR

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32913

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Randall Krakauer  
Mailing Address 29 Lorrie Lane

City State Zip Code  
Princeton Junction NJ 08550

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Medical Director - Medicare

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33437

Amount of Each Receipt this Period

500.00

Receipt

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

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Theodore Krawiec  
Mailing Address 75 Springfield Rd

City State Zip Code  
Westfield MA 01085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2100.00

Date of Receipt

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

Transaction ID: 60317.C32879

Amount of Each Receipt this Period

2100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Theodore Krawiec  
Mailing Address 75 Springfield Rd

City State Zip Code  
Westfield MA 01085

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

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

Transaction ID: 60317.C32880

Amount of Each Receipt this Period

2100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Alan J. Kreczko  
Mailing Address 5 spruce Lane

City State Zip Code  
Weatogue CT 06089-9401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Hartford

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33331

Amount of Each Receipt this Period

400.00

Receipt

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

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

4600.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** W. Jay Krompinger

Mailing Address 295 Westmont

City State Zip Code  
W Hartford CT 06117

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Orthopedic Assn. of Hart-  
ford

Occupation  
Orthopedic Surgeon

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: 60317.C32872

Amount of Each Receipt this Period

1900.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Robert Kube

Mailing Address 4709 Washington Ave.

City State Zip Code  
Shady Side MD 20764

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
oncologist

Occupation  
Doctor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32928

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Andres Kukk

Mailing Address 387 Waterville Road

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ensign Bickford

Occupation  
V.P. / Human Resources

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33429

Amount of Each Receipt this Period

200.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Mary Claire Lagno

Mailing Address 80 East End Ave., Apt 11D

City State Zip Code  
 New York NY 10028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32994

Amount of Each Receipt this Period

500.00

Receipt

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

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

Tillie Laird

Mailing Address 265 East 66th Street Apt. 26-G

City State Zip Code  
 New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Asprey Ltd

Occupation  
Manager / Retailer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33425

Amount of Each Receipt this Period

200.00

Receipt

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

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

Paul Landry

Mailing Address 6001 21st Avenue W

City State Zip Code  
 Bradenton FL 34209

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33426

Amount of Each Receipt this Period

200.00

Receipt

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

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

900.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 63 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Sonja Larkin-Thorne

Mailing Address 5 Avondale Road

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Financial Services

Occupation  
Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33357

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 2311 Utah Street

City State Zip Code  
Arlington VA 22207-4027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EDS

Occupation  
Govt Affairs

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60405.C33286

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 21 Stillwood Chase

City State Zip Code  
Simsbury CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Phoenix

Occupation  
Actuary

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33065

Amount of Each Receipt this Period

500.00

Receipt

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

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 64 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Donald G Leavitt Mailing Address 124 Forest Drive City State Zip Code Newington CT 06111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Magee Construction Occupation Contractor Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 400.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33467 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Leon Lemaire Mailing Address 21 Pinnacle Ridge Road City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32788 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Christopher Lena Mailing Address 34 Old Reservoir Road City State Zip Code Glastonbury CT 06033 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Orthopedic Assoc. of Hartford Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1900.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32870 Amount of Each Receipt this Period 1900.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**3100.00**

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



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

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

FOR LINE NUMBER: PAGE 65 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Courtland Lewis		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 34 Garfield Road		<b>Transaction ID:</b> 60317.C32833
City West Hartford	State CT	Zip Code 06107
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Orthopaedic Associates	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) DiJuana Lewis		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 18 Lenore Drive		<b>Transaction ID:</b> 60317.C32914
City Madison	State CT	Zip Code 06443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Anthem BCBS	Occupation President NE Markets	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) John Livingstone		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 58 Balfour Drive		<b>Transaction ID:</b> 60317.C33130
City W Hartford	State CT	Zip Code 06117
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer PriceWaterhouse Coopers LLP	Occupation Consultant	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 66 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Walter Lowell  
Mailing Address 164 Lovely Street

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Canton Public Golf Course

Occupation  
Golf Pro

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt

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

Transaction ID: 60405.C33279

Amount of Each Receipt this Period

200.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Ivan Lowenthal  
Mailing Address 75 Blue Swamp Road

City State Zip Code  
Litchfield CT 06759-2005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Corner Oncology Associ-  
ation

Occupation  
Physician

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1400.00

Date of Receipt

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

Transaction ID: 60317.C32935

Amount of Each Receipt this Period

150.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Ivan Lowenthal  
Mailing Address 75 Blue Swamp Road

City State Zip Code  
Litchfield CT 06759-2005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NW Corner Oncology Associ-  
ation

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2250.00

Date of Receipt

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

Transaction ID: 60317.C32936

Amount of Each Receipt this Period

850.00

Receipt

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

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 67 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Robert Lundeen

Mailing Address P.O. Box 223

City State Zip Code  
 Deer Harbor WA 98243

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33443

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Susan Lynch

Mailing Address 8 Bayberry Lane

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Homemaker

Occupation  
Homemaker

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33438

Amount of Each Receipt this Period

500.00

Receipt

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

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

David Mahder

Mailing Address 44 Carroll Road

City State Zip Code  
 Fairfield CT 06824

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Sr. VP Marketing

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32978

Amount of Each Receipt this Period

500.00

Receipt

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

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Frank Mairano

Mailing Address 60 Dyer Avenue

City State Zip Code  
Canton CT 06019

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Frank J. Mairano & Associ-  
ates

Occupation  
builder

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60405.C33476

Amount of Each Receipt this Period

250.00

Receipt

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

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

Bonnie Malley

Mailing Address 20 Devine Road

City State Zip Code  
Suffield CT 06708

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Phoenix

Occupation  
S.V.P. HR

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 08 / 2006

Transaction ID: 60317.C33066

Amount of Each Receipt this Period

500.00

Receipt

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

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

Erna Manderman

Mailing Address 68 Todd Hill Road

City State Zip Code  
Bethlehem CT 06751-1018

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 22 / 2006

Transaction ID: 60405.C33246

Amount of Each Receipt this Period

25.00

Receipt

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

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

775.00

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

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

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

FOR LINE NUMBER: PAGE 69 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Erna Manderman Mailing Address 68 Todd Hill Road City State Zip Code Bethlehem CT 06751-1018 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33397 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Delia Manjoney Mailing Address Beaver Dam Road, PRivate Dr. #3 City State Zip Code Stratford CT 06614 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32861 Amount of Each Receipt this Period 1500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Barbara Maron Mailing Address 35 Mountain Farms Road City State Zip Code W Hartford CT 06117-1838 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32849 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2800.00

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

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

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

FOR LINE NUMBER: PAGE 70 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Thomas Marra Mailing Address 7 Cobtail Way City State Zip Code Simsbury CT 06070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Pres/COO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33360 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Martin Mailing Address 169 Penn Drive City State Zip Code W Hartford CT 06119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Life Insurance Occupation VP Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33067 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Elaine Martinelli Mailing Address 278 Pilgrim Lane City State Zip Code Southington CT 06489 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33340 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 71 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Margaret McCarthy

Mailing Address 26 Pond Street, PO Box 641

City State Zip Code  
 Chatham MA 02633

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Sr. VP/CIO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33043

Amount of Each Receipt this Period

500.00

Receipt

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

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

Frank McCauley

Mailing Address 25 Greystone

City State Zip Code  
 Canton CT 06019-3715

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AETNA

Occupation  
Management

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33044

Amount of Each Receipt this Period

500.00

Receipt

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

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

William McClure

Mailing Address 701 13th Street NW

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
White & Case

Occupation  
Partner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C33004

Amount of Each Receipt this Period

1000.00

Receipt

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

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia Mcdonald		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 68 Garden Street		<b>Transaction ID:</b> 60317.C32839
City State Zip Code Farmington CT 06032	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Grove Hill Medical Ctr.	Occupation Physician	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dan McIntyre		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 64 Whitman Ave.		<b>Transaction ID:</b> 60317.C32813
City State Zip Code West Hartford CT 06107	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bayer Corp.	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Maura Melley		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 12 Woodside Circle		<b>Transaction ID:</b> 60317.C33062
City State Zip Code Hartford CT 06105-1119	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self Employed	Occupation Consultant	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

2000.00

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



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

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

FOR LINE NUMBER: PAGE 73 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Pietro Memmo		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 101 Westland Road		<b>Transaction ID:</b> 60317.C32865
City Avon	State CT	Zip Code 06001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1900.00
Name of Employer requested 	Occupation Requested 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1900.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Kristian Mineau		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 22 Drumlin Rd		<b>Transaction ID:</b> 60317.C32864
City West Simsbury	State CT	Zip Code 06092
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1700.00
Name of Employer Self 	Occupation Physician 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Townsend Mink		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address P.O. Box 1437		<b>Transaction ID:</b> 60405.C33427
City Bristol	State CT	Zip Code 06011-1437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired 	Occupation Retired 	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Peter Mlynarczyk  
Mailing Address 140 Overlook Avenue

City State Zip Code  
New Britain CT 06053

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
City of New Britain

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60405.C33284

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Amitkumar Mody  
Mailing Address 148 Republic Drie 146

City State Zip Code  
Bloomfield CT 06002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32920

Amount of Each Receipt this Period

250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Richard Molk  
Mailing Address 257 New London Tpke

City State Zip Code  
Glastonbury CT 06033-2232

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32841

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 75 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Patrick Monahan Mailing Address 497 Leetes Island Rd., 2nd Floor City State Zip Code Branford CT 06405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CT Hospital Assn. Occupation General Counsel Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32807 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard L. Mucci Mailing Address 87 Northgate City State Zip Code Avon CT 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33355 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Raji Mulukutla Mailing Address 18 West Wynd Terrace City State Zip Code Middletown CT 06457 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32835 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 76 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Chris Nelson Mailing Address 40 Centerbrook Drive City Farmington State CT Zip Code 06032-3332 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer C. Nelson Constuction Inc. Occupation Homebuilder Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33477 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Allen Nixon Mailing Address 1 Atwater Terrace City Farmington State CT Zip Code 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33263 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Gerard Nolan Mailing Address 231 Farmington Ave PO Box 827 City Farmington State CT Zip Code 06034 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32857 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Felicia Norwood  
 Mailing Address 15 West 15th Street

City State Zip Code  
 Chicago IL 60605

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 AETNA

Occupation  
 Insurance Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

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

Transaction ID: 60317.C32995

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 James OBrien  
 Mailing Address 190 Farmington Ave.

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self Employed

Occupation  
 Lobbyist

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33132

Amount of Each Receipt this Period

1000.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 Gina OConnell  
 Mailing Address 143 Warner Court

City State Zip Code  
 Glastonbury CT 06033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Phoenix

Occupation  
 Actuary

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

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

Transaction ID: 60405.C33202

Amount of Each Receipt this Period

500.00

Receipt

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

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

2000.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Joseph OConnell

Mailing Address 640 Ridge Road

City State Zip Code  
 Orange CT 06477

FEC ID number of contributing federal political committee.

C

Name of Employer  
Oncology Hematology Assoc-  
iationOccupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32930

Amount of Each Receipt this Period

500.00

Receipt

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

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

Mailing Address 600 Asylum Ave., Apt. 715

City State Zip Code  
 Hartford CT 06105

FEC ID number of contributing federal political committee.

C

Name of Employer  
Aetna Inc.Occupation  
Vice President: Public Policy

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32996

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Mailing Address 875 Scotland Rd

City State Zip Code  
 Norwich CT 06360

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32847

Amount of Each Receipt this Period

1250.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Oestrich Mailing Address 36 Hillspoint Rd. City State Zip Code Westport CT 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32825 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Theodore Okon Mailing Address 30 Wintergreen Drive City State Zip Code Monroe CT 06468 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32922 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Olejniczak Mailing Address 67 High Valley Drive City State Zip Code Canton CT 06019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation VP & Controller Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2006 <b>Transaction ID:</b> 60317.C33047 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Stanislaus Opalacz

Mailing Address 108 Old Farms West

City State Zip Code  
 Middletown CT 06457

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Middlesex Gastroenterology  
Ass

Occupation  
Partner - physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

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

Transaction ID: 60317.C32823

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Robert Ortenzio

Mailing Address 1617 Olmsted Way East

City State Zip Code  
 Camp Hill PA 17011

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Select Medical Corp.

Occupation  
President and CEO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33020

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Rocco Ortenzio

Mailing Address 7 Westwind Drive

City State Zip Code  
 Lemoyne PA 17043

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Select Medical Corporation

Occupation  
Executive Chairman

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33018

Amount of Each Receipt this Period

2000.00

Receipt

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

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

4500.00

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



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

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

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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)

Johnson for Congress Committee

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

Henry Paparazzo

Mailing Address 223 Tappan Brook Road

City State Zip Code  
 Bridgewater CT 06752

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Heritage Dev. Group Inc.

Occupation  
Real Estate Develop

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60405.C33282

Amount of Each Receipt this Period

250.00

Receipt

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

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

Terry Paul

Mailing Address 700 13th Street NW, Suite 400

City State Zip Code  
 Washington DC 20005-3960

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cassidy & Associates Inc.

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33144

Amount of Each Receipt this Period

500.00

Receipt

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

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

Betsy Perkins

Mailing Address 5055 Gulf of Mexico Drive, Unit 51

City State Zip Code  
 Longboat Key FL 34228-2003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: 60405.C33209

Amount of Each Receipt this Period

450.00

Receipt

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

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

1200.00

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)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
John Perkins  
Mailing Address 43 East Shore Road

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Perkins Travel

Occupation  
Owners

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1071.40

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 6

Transaction ID: 60317.C33201

Amount of Each Receipt this Period

1071.40

In-Kind

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

catering for Burke Doar  
event

**B.** Full Name (Last, First, Middle Initial)  
James Pinke  
Mailing Address 11 Patrick Drive

City State Zip Code  
Seymour CT 06483

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

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

Transaction ID: 60317.C32862

Amount of Each Receipt this Period

1500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Andrew Pinkes  
Mailing Address 29 Fawn Brook

City State Zip Code  
W Hartford CT 06117-1032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Hartford

Occupation  
Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33359

Amount of Each Receipt this Period

500.00

Receipt

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

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

3071.40

**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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Philip Polkinghorn Mailing Address 38 Metacom Drive City State Zip Code Simsbury CT 06070 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Companies Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33070 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert J. Price Mailing Address 2 Colton Street City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Fin. Services Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33349 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) James Prister Mailing Address 4120 Emporia Court City State Zip Code Naperville IL 60564 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer RML Specialty Hospital Occupation President & CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33415 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 84 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Richard Pugh		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 38 Ridgewood Extension		<b>Transaction ID:</b> 60317.C32812
City Woodbury	State CT	Zip Code 06798
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer New Milford Hospital	Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Edward Pulice		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 286 Queens Grant Rd		<b>Transaction ID:</b> 60317.C32827
City Fairfield	State CT	Zip Code 06430
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00
Name of Employer Self	Occupation Physician	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Sheila Quirk		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 29 Pembroke Hill		<b>Transaction ID:</b> 60317.C33048
City Farmington	State CT	Zip Code 06032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AETNA	Occupation Finance	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

1750.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Zafar Rashid Mailing Address 180 Deercliff Road City Avon State CT Zip Code 06001-2851 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Occupation Finance Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33063 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Craig Raymond Mailing Address 5 Five Gaits Farm City West Simsbury State CT Zip Code 06092 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Life, Inc. Occupation CRO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33351 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Redemske Mailing Address 89 Stagecoach Road City Avon State CT Zip Code 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer University of CT Occupation Teacher/CPA Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33432 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Trevor Reeves

Mailing Address 2 Windsor Court

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60317.C32910

Amount of Each Receipt this Period

250.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Karl Reichelt

Mailing Address 9312 Old Mansion Road

City State Zip Code  
Alexandria VA 22309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Greenberg Traurig

Occupation  
Executive

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33127

Amount of Each Receipt this Period

200.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Joan Reuter

Mailing Address 9 Homestead Drive

City State Zip Code  
Enfield CT 06082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33413

Amount of Each Receipt this Period

100.00

Receipt

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

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

550.00

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

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

FOR LINE NUMBER: PAGE 87 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia Rice Mailing Address 11 Harpers Ferry Way City Mechanicsburg State PA Zip Code 17050 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Select Medical Corporation Occupation COO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33019 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Tracy Rich Mailing Address 65 North Farms Road City Avon State CT Zip Code 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Group Inc. Occupation Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33082 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bernice Rieg Mailing Address 2 Eastland Drive City Manchester State CT Zip Code 06040 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer requested Occupation Requested Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33422 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**3100.00****TOTAL** This Period (last page this line number only) .....

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

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

FOR LINE NUMBER: PAGE 88 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Willem Rijkssen Mailing Address 37 Andrew Drive City Canton State CT Zip Code 06019 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer The Hartford Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33329 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Aron Rose Mailing Address 136 Riverview Avenue City Branford State CT Zip Code 06405 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32832 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Rowe Mailing Address 300 Central Park West City New York State NY Zip Code 10024 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2006 <b>Transaction ID:</b> 60317.C33053 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3250.00

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



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

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

FOR LINE NUMBER: PAGE 89 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
George Rubin  
Mailing Address 31 Highfield Road

City State Zip Code  
Norfolk CT 06058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Litchfield Hills Orthoped-  
ic As

Occupation  
Orthopedic Surgeon

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32831

Amount of Each Receipt this Period

1000.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
James Ruel  
Mailing Address 38 Enrico Road

City State Zip Code  
Bolton CT 06043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Financial Servic-  
es

Occupation  
Sr. VP

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33335

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Donald Salzberg  
Mailing Address 30 Blue Ridge Drive

City State Zip Code  
Weatogue CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32858

Amount of Each Receipt this Period

1250.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Santini		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address 1031 Hartford Turnpike P.O. Box 238		<b>Transaction ID:</b> 60405.C33473	
City Vernon	State CT	Zip Code 06066	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Self-Employed	Occupation Builder Developer		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mary Sargent		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6	
Mailing Address 25 Colony Road		<b>Transaction ID:</b> 60405.C33285	
City West Hartford	State CT	Zip Code 06117	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Julie Sargis		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6	
Mailing Address 70 Grove Hill Apt. 4W		<b>Transaction ID:</b> 60405.C33268	
City New Britain	State CT	Zip Code 06050	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Retired	Occupation Retired		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00		

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Jonathan Sasportas

Mailing Address P. O. Box 340

City State Zip Code  
Windsor CT 06095

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sasportas Company

Occupation  
Home Builder

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33465

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Leonard Schaeffer

Mailing Address 360 N. Bristol Ave.

City State Zip Code  
Los Angeles CA 90049-2606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PacifiCare

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33431

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Janet Schmitz

Mailing Address 110 Winfield Lane

City State Zip Code  
New Canaan CT 06840

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
volunteer

Occupation  
Volunteer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60405.C33281

Amount of Each Receipt this Period

250.00

Receipt

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

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 92 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Elwin Schwartz

Mailing Address 20 Concord Dr

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32840

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Stephen Scroggs

Mailing Address 25 W. Del Key Avenue

City State Zip Code  
 Alexandria VA 22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Calvert Health Partners,  
LLC

Occupation  
Govt Affairs

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32968

Amount of Each Receipt this Period

500.00

Receipt

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

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

George Seabourne

Mailing Address P.O. Box 54

City State Zip Code  
 Thomaston CT 06787

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Seabourne & Malley

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33418

Amount of Each Receipt this Period

100.00

Receipt

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

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 93 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Martin Seremet Mailing Address 71 Kirkwood Rd City State Zip Code West Hartford CT 06117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32837 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ijaz Shafi Mailing Address 3 St. Andrew Drive City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New Britain General Occupation Ophthalmologist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32853 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Jane Shapiro Mailing Address 36 Spoke Dr City State Zip Code Woodbridge CT 06525 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32820 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) John Sharry Mailing Address 360 Dover Road City State Zip Code Westwood MA 02090 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Companies Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 08 / 2006 <b>Transaction ID:</b> 60317.C33077 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Bradford Sherburne Mailing Address 22 Concord Street City State Zip Code W Hartford CT 06119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Pathology Assoc. Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 15 / 2006 <b>Transaction ID:</b> 60317.C33128 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Steven Sigal Mailing Address 192 Krawski Drive City State Zip Code South Windsor CT 06074-3845 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Vice President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 01 / 2006 <b>Transaction ID:</b> 60317.C33013 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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

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

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
David Silverstone  
Mailing Address 13 Island View Avenue

City State Zip Code  
Branford CT 06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32826

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Philip Silverstone  
Mailing Address 31 Penny Lane

City State Zip Code  
Woodbridge CT 06525

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32819

Amount of Each Receipt this Period

500.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
John Simses  
Mailing Address 165 White Oak Rd

City State Zip Code  
Fairfield CT 06825

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32818

Amount of Each Receipt this Period

500.00

Receipt

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

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 96 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Singer Mailing Address 55 Nye Road City Glastonbury State CT Zip Code 06033 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Ophthalmologist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32856 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Christine Skelly Mailing Address 45 Glenwood Road City W Hartford State CT Zip Code 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Product Busniess Unit Head Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 15 / 2006 <b>Transaction ID:</b> 60317.C33086 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Deforest Smith Mailing Address 247 Broad Street City Milford State CT Zip Code 06460 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer George J. Smith & Son Occupation Real Estate Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32785 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1850.00

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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Ruth Smith Mailing Address 1100 Janneys Lane City State Zip Code Alexandria VA 22302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Travelers Occupation Lobbyist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 03 / 15 / 2006 <b>Transaction ID:</b> 60317.C33083 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) T. G. Smith Mailing Address 3918 Jackson Street City State Zip Code Alexandria LA 71303 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Genesis Specialty Hospita- ls Occupation CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33273 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Alan Solinsky Mailing Address 43 Juniper Lane City State Zip Code W Hartford CT 06117-1127 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Ophthalmologist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32851 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Diane Souza Mailing Address 360 Stanley Drive City Glastonbury State CT Zip Code 06033 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32974 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Raymond Sprague Mailing Address 108 Pinehill Road City Tolland State CT Zip Code 06084 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Financial Services Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33346 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Samuel Sprotzer Mailing Address 3 Edgehill Rd City Woodbridge State CT Zip Code 06525-1418 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1600.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32863 Amount of Each Receipt this Period 1600.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Alan Stern

Mailing Address 190 Garden Street

City State Zip Code  
 Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Grove Hill Medical Ctr.

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C32836

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Michael Stocker

Mailing Address 1056 5th Ave.

City State Zip Code  
 New York NY 10028-0112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Empire Health Choice

Occupation  
President/CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32990

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Thomas Strohenger

Mailing Address 6 Hatheway Dr.

City State Zip Code  
 West Hartford CT 06107-1130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aetna Inc.

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33481

Amount of Each Receipt this Period

500.00

Receipt

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

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

2500.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Raymond Sullivan  
Mailing Address 45 Saddle Ridge Drive

City State Zip Code  
West Simsbury CT 06092

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Requested

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1900.00

Date of Receipt

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

Transaction ID: 60317.C32867

Amount of Each Receipt this Period

1900.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Edmund Suski  
Mailing Address 20 Drury Lane

City State Zip Code  
West Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32852

Amount of Each Receipt this Period

1250.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Ann Taylor  
Mailing Address 7 Clover Lane

City State Zip Code  
Weatogue CT 06089

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CT Childrens Medical Cent-  
er

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C32925

Amount of Each Receipt this Period

500.00

Receipt

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

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

3650.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Charles Therrien Mailing Address 252 Charter Oak Dr. City State Zip Code Southbury CT 06488 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Sharon Hospital Occupation Health Care Administration Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 02 / 07 / 2006 <b>Transaction ID:</b> 60317.C32927 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Gary Thompson Mailing Address 82 Lofgren Road City State Zip Code Avon CT 06001-3170 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Financial Services Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt MM / DD / YYYY 03 / 31 / 2006 <b>Transaction ID:</b> 60405.C33358 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Edward Tierney Mailing Address 72 Apple Lane, P.O. Box 21 City State Zip Code Roxbury CT 06783-0021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00		Date of Receipt MM / DD / YYYY 03 / 22 / 2006 <b>Transaction ID:</b> 60405.C33277 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Jonathan Topodas

Mailing Address 10314 Regency Station Drive

City State Zip Code  
 Fairfax VA 22039

FEC ID number of contributing federal political committee.

C

Name of Employer  
AETNAOccupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60317.C33052

Amount of Each Receipt this Period

2000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Donald Townswick

Mailing Address 21 Bainbridge Road

City State Zip Code  
 W Hartford CT 06119

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hedge FundOccupation  
Partner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33129

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Roger Van Dyke

Mailing Address 21 Queen Eleanor Dr

City State Zip Code  
 Gales Ferry CT 06335

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 60317.C32830

Amount of Each Receipt this Period

750.00

Receipt

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

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

3000.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

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

Scott Wallace

Mailing Address 517 N. Euclid

City State Zip Code  
 Oak Park IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer  
Nat. Alliance of Health  
Info TOccupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60317.C32962

Amount of Each Receipt this Period

300.00

Receipt

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

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

John Walters

Mailing Address 8 Pernbroke Drive

City State Zip Code  
 Avon CT 06001

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hartford Finance ServicesOccupation  
Executive Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33334

Amount of Each Receipt this Period

500.00

Receipt

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

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

Francis Waltman

Mailing Address 2 Silver Brook Lane

City State Zip Code  
 North Granby CT 06060

FEC ID number of contributing federal political committee.

C

Name of Employer  
PhoenixOccupation  
Asst. Mgt. Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60317.C33060

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Martin Wand		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 85 Prattling Pond Road		<b>Transaction ID:</b> 60317.C32844
City Farmington	State CT	Zip Code 06032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1062.50
Name of Employer Self Employed	Occupation Ophthalmologist	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1062.50	

<b>B.</b> Full Name (Last, First, Middle Initial) John Webb		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address 1090 Bay Pointe Crossing		<b>Transaction ID:</b> 60317.C33012
City Alpharetta	State GA	Zip Code 30005
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer AETNA	Occupation Executive	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) James Wehr		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 11 Natures Way		<b>Transaction ID:</b> 60317.C33061
City South Windsor	State CT	Zip Code 06074-1627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Phoenix Investments	Occupation Chief Investment Officer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

2062.50

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



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

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

FOR LINE NUMBER: PAGE 105 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
 Samuel Weinhoff

Mailing Address 1035 5th Ave., Apt. 14D

City State Zip Code  
 New York NY 10028-0135

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Consultant

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60317.C33076

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Mailing Address 8 Emerald Lane

City State Zip Code  
 Woodbridge CT 06525

FEC ID number of contributing federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

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

Transaction ID: 60317.C32846

Amount of Each Receipt this Period

1250.00

Receipt

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

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

Mailing Address 14 Grove Avenue

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hartford Life, Inc.Occupation  
Dir. Govt Affairs

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33356

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Robert Whittemore Mailing Address Box 827 City State Zip Code Middlebury CT 06762-0827 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33441 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Christopher Wilkos Mailing Address 756 Main St. City State Zip Code South Windsor CT 06074 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Life Insurance Occupation Portfolio Manager Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33069 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Darren Willcox Mailing Address 5202 Wehawken Road City State Zip Code Bethesda MD 20816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Dutko Group Occupation Principal Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33145 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 107 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Darren Willcox		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address 5202 Wehawken Road		<b>Transaction ID:</b> 60317.C33200
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Dutko Group	Occupation Principal	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 525.00	
		In-Kind <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) room rental for 3/9/06 event

<b>B.</b> Full Name (Last, First, Middle Initial) Ronald Williams		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 11 Farnham Way		<b>Transaction ID:</b> 60317.C33054
City Farmington	State CT	Zip Code 06032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Aetna Inc.	Occupation President/CEO	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Ronald Williams		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 11 Farnham Way		<b>Transaction ID:</b> 60317.C33055
City Farmington	State CT	Zip Code 06032
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Aetna Inc.	Occupation President/CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	
		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4025.00

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

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

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

FOR LINE NUMBER: PAGE 108 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

A. Joann Willis

Mailing Address 4545 North Glebe Road

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing federal political committee.

C

Name of Employer  
Patton BoggsOccupation  
Government Relations

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33182

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Robert Wolek

Mailing Address 31 Dairy Hill Road

City State Zip Code  
 Madison CT 06443

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Radiologist

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60405.C33261

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Robert Wood

Mailing Address 2207 Traies Court

City State Zip Code  
 Alexandria VA 22306

FEC ID number of contributing federal political committee.

C

Name of Employer  
Barbour, Griffith & RogersOccupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33015

Amount of Each Receipt this Period

500.00

Receipt

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

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

1600.00

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

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

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

FOR LINE NUMBER: PAGE 109 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Elease Wright Mailing Address 205 Girard Avenue City State Zip Code Hartford CT 06105 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AETNA Occupation Human Resources Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32977 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Yass Mailing Address 1368 Asylum Avenue City State Zip Code Hartford CT 06105 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hartford Financial Services Occupation Government Affairs Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33327 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Dona Young Mailing Address 64 Waterside Lane City State Zip Code West Hartford CT 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phoenix Co., Inc. Occupation CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33079 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Karen Zabrensky  
Mailing Address 114 Woodford Hills Dr.

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33024

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Gordon Zimmermann  
Mailing Address 325 Old Mountain Road

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
requested

Occupation  
Physician

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1900.00

Date of Receipt

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

Transaction ID: 60317.C32871

Amount of Each Receipt this Period

1900.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Lizabeth Zlatkus  
Mailing Address 94 Warner Ct.

City State Zip Code  
Glastonbury CT 06033

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hartford Life, Inc.

Occupation  
Pres. Int; Wealth Mgt

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

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

Transaction ID: 60405.C33287

Amount of Each Receipt this Period

500.00

Receipt

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

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

2900.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

David Wiener

Mailing Address 150 Scarborough Street

City State Zip Code  
Hartford CT 06105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Hartford

Occupation  
Pres/COO

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60405.C33362

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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) .....

219628.90

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

FOR LINE NUMBER: PAGE 112 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Aegon USA Inc PAC Mailing Address Ms. Jeanne de Cervens 1111 North Charles Street City Baltimore State MD Zip Code 21201 FEC ID number of contributing federal political committee. <b>C</b> C00236414 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33296 Amount of Each Receipt this Period 1500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Aetna PAC Mailing Address Ms. Charleen Iovino 1501 M Street, NW, Suite 400 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00181826 Name of Employer Aetna PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 8000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33157 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Aetna PAC Mailing Address Ms. Charleen Iovino 1501 M Street, NW, Suite 400 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00181826 Name of Employer Aetna PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 9000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33292 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		



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

FOR LINE NUMBER: PAGE 113 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** Agri-Mark Inc. Leg. & Educ. Comm. PAC

Mailing Address Mr. Nathan Cushman  
 100 Milk Street, Office Park

City State Zip Code  
 Methuen MA 01844

FEC ID number of contributing  
federal political committee.**C** C00141242

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	6

Transaction ID: 60317.C33142

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** Air Line Pilots Assn PAC

Mailing Address Mr. Frank J. Voyack  
 1625 Massachusetts Ave, NW

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.**C** C00035451Name of Employer  
Air Line Pilots Assoc PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

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

Transaction ID: 60405.C33216

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** Akin, Gump AGSH&F Civic Action Comm

Mailing Address Mr. Barney J. Skladany, Jr.  
 1333 New Hampshire Ave, NW, Ste 40

City State Zip Code  
 Washington DC 20036

FEC ID number of contributing  
federal political committee.**C** C00104901Name of Employer  
AGSHF CIVIC ACTION Comm

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 60405.C33289

Amount of Each Receipt this Period

750.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** Am Academy of Ophthalmology Inc. PAC

Mailing Address Ms. Catherine Cohen  
 1101 Vermont Ave., NW, Suite 700

City State Zip Code  
 Washington DC 20005-3570

FEC ID number of contributing  
 federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33137

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** Am Academy of Ophthalmology Inc. PAC

Mailing Address Ms. Catherine Cohen  
 1101 Vermont Ave., NW, Suite 700

City State Zip Code  
 Washington DC 20005-3570

FEC ID number of contributing  
 federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33138

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** Am. College of Surgeons Professional Ass

Mailing Address Mr. Christian Shalgian  
 1640 Wisconsin Ave NW

City State Zip Code  
 Washington DC 20007

FEC ID number of contributing  
 federal political committee. **C** C00382424

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33196

Amount of Each Receipt this Period

2500.00

Receipt

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

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 115 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Am. Soc. for Clinical Laboratory Science

Mailing Address 6701 Democracy Blvd., Suite 300

City State Zip Code  
Bethesda MD 20817

FEC ID number of contributing  
federal political committee. **C** C00034645

Name of Employer  
Amer Soc For Medical Tech-  
nology

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33191

Amount of Each Receipt this Period

1500.00

Receipt

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

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

Amer Assn of Bioanalysts PAC

Mailing Address Mr. Robert Waters  
1301 K St., NW, Ste. 900 E. Tower

City State Zip Code  
Washington DC 20005-3317

FEC ID number of contributing  
federal political committee. **C** C00249581

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

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

Transaction ID: 60405.C33222

Amount of Each Receipt this Period

2000.00

Receipt

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

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

Amer Assn of Clinical Urologists PAC

Mailing Address Ms. Wendy Weiser  
1111 North Plaza Drive, Suite 550

City State Zip Code  
Schaumburg IL 60173

FEC ID number of contributing  
federal political committee. **C** C00273003

Name of Employer  
American Assn of Clinical  
Urol

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

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

Transaction ID: 60317.C32938

Amount of Each Receipt this Period

1000.00

Receipt

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 116 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Amer Assn of Clinical Urologists PAC Mailing Address Ms. Wendy Weiser 1111 North Plaza Drive, Suite 550 City State Zip Code Schaumburg IL 60173 FEC ID number of contributing federal political committee. <b>C</b> C00273003 Name of Employer American Assn of Clinical Urol Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33176 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Amer Assn of Clinical Urologists PAC Mailing Address Ms. Wendy Weiser 1111 North Plaza Drive, Suite 550 City State Zip Code Schaumburg IL 60173 FEC ID number of contributing federal political committee. <b>C</b> C00273003 Name of Employer American Assn of Clinical Urol Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33134 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Amer Assn of Nurse Anesthetists PAC Mailing Address Ms. Allison Craighead 412 First Street, SE, Suite 12 City State Zip Code Washington DC 20003 FEC ID number of contributing federal political committee. <b>C</b> C00173153 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33147 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

3000.00

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

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

FOR LINE NUMBER: PAGE 117 / 218

(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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Assoc. of Orthopaedic Surgeons PACMailing Address Ms. Kathryn M. Pontzer  
317 Massachusetts Ave, NE, Suite 1City State Zip Code  
Washington DC 20002-5701FEC ID number of contributing  
federal political committee. **C** C00343137Name of Employer  
American Orthopaedic Surg  
PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
6000.00

Date of Receipt

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

Transaction ID: 60317.C32953

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Assoc. of Orthopaedic Surgeons PACMailing Address Ms. Kathryn M. Pontzer  
317 Massachusetts Ave, NE, Suite 1City State Zip Code  
Washington DC 20002-5701FEC ID number of contributing  
federal political committee. **C** C00343137Name of Employer  
American Orthopaedic Surg  
PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33159

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Chiropractic Assn PACMailing Address Ms. Kim Krocher  
1701 Clarendon Blvd.City State Zip Code  
Arlington VA 22209FEC ID number of contributing  
federal political committee. **C** C00102764Name of Employer  
American Chiropractic Ass-  
oc.

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33171

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 118 / 218

(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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Council of Life Insurers

Mailing Address Ms. Kate Smith

101 Constitution Avenue, N.W.

City

State

Zip Code

Washington

DC

20001

FEC ID number of contributing  
federal political committee.**C** C00147066

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

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

Transaction ID: 60405.C33298

Amount of Each Receipt this Period

3000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Health Quality Assn PAC

Mailing Address Mr. Todd D. Ketch

1140 Connecticut Avenue, NW, Suite

City

State

Zip Code

Washington

DC

20036

FEC ID number of contributing  
federal political committee.**C** C00370213Name of Employer  
American Health Quality  
Associ

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60317.C32937

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Institute of Certified Public Acct.

Mailing Address Mr. Tom Higginbotham

1455 Pennsylvania Ave, NW, Ste 400

City

State

Zip Code

Washington

DC

20004-1081

FEC ID number of contributing  
federal political committee.**C** C00077321Name of Employer  
AICPA PAC

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60405.C33227

Amount of Each Receipt this Period

1000.00

Receipt

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

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

5000.00

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

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

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

FOR LINE NUMBER: PAGE 119 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Occupational Therapy Assn PAC

Mailing Address Ms. Christina A. Metzler

4720 Montgomery Lane, Box 31220

City

State

Zip Code

Bethesda

MD

20824-1220

FEC ID number of contributing  
federal political committee.

**C** C00089086

Name of Employer  
American Occupational The-  
rapy

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33177

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Osteopathic Information Assn. PAC

Mailing Address Ms. Amy Andryszak

1090 Vermont Avenue, N.W., Suite 5

City

State

Zip Code

Washington

DC

20005

FEC ID number of contributing  
federal political committee.

**C** C00113803

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

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

Transaction ID: 60405.C33217

Amount of Each Receipt this Period

5000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Podiatric Medical Assn PAC

Mailing Address Ms. Faye Frankfort

9312 Old Georgetown Road

City

State

Zip Code

Bethesda

MD

20814

FEC ID number of contributing  
federal political committee.

**C** C00008839

Name of Employer  
American Podiatric Medical  
Ass

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33009

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Psychiatric Assn PAC

Mailing Address Mr. Jason Pray  
1000 Wilson Blvd., Suite 1825

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing  
federal political committee.

**C** C00373696

Name of Employer  
American Psychiatric Assoc

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

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

Transaction ID: 60405.C33215

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Amer Soc of Anesthesiologists PAC

Mailing Address Mr. Manuel Bonilla  
1101 Vermont Ave, NW, Suite 606

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00255752

Name of Employer

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33461

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Amer Staffing Association PAC

Mailing Address Mr. Edward Lenz  
277 South Washington St, Suite 200

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00145623

Name of Employer  
Amer Staffing PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32985

Amount of Each Receipt this Period

1000.00

Receipt

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

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

5000.00

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



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

FOR LINE NUMBER: PAGE 121 / 218

(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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Amer Trucking Assn PACMailing Address Jackie Kelly, Jr.  
430 First Street S. E.City State Zip Code  
Washington DC 20003FEC ID number of contributing  
federal political committee.**C** C00002881

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33455

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** American Ambulance Assn. Federal PACMailing Address Government Affairs Director  
8201 Greensboro Drive, Suite 300City State Zip Code  
McLean VA 22102FEC ID number of contributing  
federal political committee.**C** C00168070Name of Employer  
American Ambulance Associ-  
ation

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 60317.C32940

Amount of Each Receipt this Period

2500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** American Clinical Laboratory Assn. PAC

Mailing Address 1250 H Street, NW, Suite 88

City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.**C** C00410084

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60405.C33223

Amount of Each Receipt this Period

2000.00

Receipt

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 122 / 218

(check only one)

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

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)  
**A.** American College of Physicians Services

Mailing Address Mr. Richard Trachtman  
 2011 Pennsylvania Ave., NW, Ste 80

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
 federal political committee. **C** C00403881

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33448

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**B.** American College of Radiology Assn.

Mailing Address Dr. Melanie Young  
 1891 Preston White Drive

City State Zip Code  
 Reston VA 20191-4397

FEC ID number of contributing  
 federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33187

Amount of Each Receipt this Period

1500.00

Receipt

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

Full Name (Last, First, Middle Initial)  
**C.** American Medical Group PAC

Mailing Address 1422 Duke Street

City State Zip Code  
 Alexandria VA 22314

FEC ID number of contributing  
 federal political committee. **C** C00408120

Name of Employer Occupation  
 American Medical Group PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33172

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 123 / 218

(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)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** American Medical Response PACMailing Address Government Affairs Director  
6200 S. Syracuse Way, Ste. 200City State Zip Code  
Englewood CO 80111FEC ID number of contributing  
federal political committee. **C** C00389585

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32939

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** American Orthotic & Prosthetic Assn. PACMailing Address Walter Gorski  
330 John Cariyle St., Ste. 200City State Zip Code  
Alexandria VA 22314-5760FEC ID number of contributing  
federal political committee. **C** C00118430Name of Employer  
Amer Orthotic & Prosthetic  
Asso

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33464

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** American Orthotic & Prosthetic Assn. PACMailing Address Walter Gorski  
330 John Cariyle St., Ste. 200City State Zip Code  
Alexandria VA 22314-5760FEC ID number of contributing  
federal political committee. **C** C00118430Name of Employer  
Amer Orthotic & Prosthetic  
Asso

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33463

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

11000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.**

Full Name (Last, First, Middle Initial)

AmerisourceBergen Corp PAC

Mailing Address 1300 Morris Drive, Suite 100

City State Zip Code  
 Chesterbrook PA 19087

FEC ID number of contributing  
federal political committee.

**C** C00400929

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33185

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **B.**

Full Name (Last, First, Middle Initial)

Asea Brown Boveri Employees Fund

Mailing Address Mr. Bruce Talley  
 555 12th Street, NW, Ste. 350 Nort

City State Zip Code  
 Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00041947

Name of Employer  
 COMBUSTION ENGINEERI

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C33000

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **C.**

Full Name (Last, First, Middle Initial)

Assn Manufacturing Tech Machine Tool PAC

Mailing Address Mr. James Mack  
 7901 Westpark Drive

City State Zip Code  
 Mc Lean VA 22102-4206

FEC ID number of contributing  
federal political committee.

**C** C00034173

Name of Employer  
 Machine Tool PAC

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32984

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.**

Full Name (Last, First, Middle Initial)

B&D Sagamore PAC

Mailing Address Ms. Lisa Levin

805 15th Street, NW, Ste 700

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

**C** C00386904

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33153

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **B.**

Full Name (Last, First, Middle Initial)

Back Americas Conservatives PAC

Mailing Address Government Affairs Director

PO Box 6623

City

Arlington

State

VA

Zip Code

22206

FEC ID number of contributing  
federal political committee.

**C** C00377028

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32952

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **C.**

Full Name (Last, First, Middle Initial)

Baker Botts Bluebonnet Fund

Mailing Address 910 Louisiana ST. Suite 3000

City

Houston

State

TX

Zip Code

77002

FEC ID number of contributing  
federal political committee.

**C** C00077552

Name of Employer  
Baker Botts Bluebonnet Fu-  
nd

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33225

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bayer Corp PAC Mailing Address Dr. Ron Docksa 1275 Pennsylvania Ave, NW, Ste 801 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00281162 Name of Employer Bayer Corp PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32954 Amount of Each Receipt this Period 2000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Beverly Enterprises Inc. (AC) Mailing Address Mr. Jack McDonald 1250 H Street, NW, Ste 555 City Washington State DC Zip Code 20005-3965 FEC ID number of contributing federal political committee. <b>C</b> C00346346 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33189 Amount of Each Receipt this Period 1500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Beverly Enterprises Inc. (AC) Mailing Address Mr. Jack McDonald 1250 H Street, NW, Ste 555 City Washington State DC Zip Code 20005-3965 FEC ID number of contributing federal political committee. <b>C</b> C00346346 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 7500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33198 Amount of Each Receipt this Period 2500.00 <b>Receipt</b> <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Beverly Enterprises Inc. (AC) Mailing Address Mr. Jack McDonald 1250 H Street, NW, Ste 555 City Washington State DC Zip Code 20005-3965 FEC ID number of contributing federal political committee. <b>C</b> C00346346 Name of Employer _____ Occupation _____ Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Election Cycle-to-Date ▼ _____ 8000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33141 Amount of Each Receipt this Period _____ 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Bingham McCutchen LLP PAC Mailing Address Mr. Brian Fitzgerald 3000 K Street, NW, Ste 300 City Washington State DC Zip Code 20007-5116 FEC ID number of contributing federal political committee. <b>C</b> C00165621 Name of Employer Swidler Berlin Shereff Friedma Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Election Cycle-to-Date ▼ _____ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33224 Amount of Each Receipt this Period _____ 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Boeing PAC Mailing Address Ms. Kristine Miller 1200 Wilson Blvd. City Arlington State VA Zip Code 22209 FEC ID number of contributing federal political committee. <b>C</b> C00142711 Name of Employer Boeing PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ _____ Election Cycle-to-Date ▼ _____ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33458 Amount of Each Receipt this Period _____ 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**2500.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Bond Market Assn PAC Mailing Address Ms. Jill Hershey 1399 New York Ave, NW, 8th Floor City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00158980 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33321 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Brown Rudnick Berlack Israels LLP PAC Mailing Address 1 Financial Center City Boston State MA Zip Code 02111 FEC ID number of contributing federal political committee. <b>C</b> C00410613 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33294 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Ceridian Corporation PAC Mailing Address Mr. James OConnell 1300 I Street, NW, Ste 420E City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00344127 Name of Employer Ceridian Corporation PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32986 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Cigna Corporation PAC Mailing Address Ms. Kristin Julason 2001 Pennsylvania Ave, NW, Ste 350 City Washington State DC Zip Code 20006-1825 FEC ID number of contributing federal political committee. <b>C</b> C00085316 Name of Employer Cigna Corporation PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32967 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Cigna Corporation PAC Mailing Address Ms. Kristin Julason 2001 Pennsylvania Ave, NW, Ste 350 City Washington State DC Zip Code 20006-1825 FEC ID number of contributing federal political committee. <b>C</b> C00085316 Name of Employer Cigna Corporation PAC Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32966 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Cigna Corporation PAC Mailing Address Ms. Kristin Julason 2001 Pennsylvania Ave, NW, Ste 350 City Washington State DC Zip Code 20006-1825 FEC ID number of contributing federal political committee. <b>C</b> C00085316 Name of Employer Cigna Corporation PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C32965 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Cigna Corporation PAC

Mailing Address Ms. Kristin Julason

2001 Pennsylvania Ave, NW, Ste 350

City

State

Zip Code

Washington

DC

20006-1825

FEC ID number of contributing  
federal political committee.

**C** C00085316

Name of Employer  
Cigna Corporation PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C33001

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Cigna Corporation PAC

Mailing Address Ms. Kristin Julason

2001 Pennsylvania Ave, NW, Ste 350

City

State

Zip Code

Washington

DC

20006-1825

FEC ID number of contributing  
federal political committee.

**C** C00085316

Name of Employer  
Cigna Corporation PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

8000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33213

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Clinical Laboratory Management Assn PAC

Mailing Address Ms. Katharine J. Ayres

989 Old Eagle School Road, Suite 8

City

State

Zip Code

Wayne

PA

19087

FEC ID number of contributing  
federal political committee.

**C** C00381152

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33220

Amount of Each Receipt this Period

2000.00

Receipt

☐ 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)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

## **A.**

Full Name (Last, First, Middle Initial)

Community Action Program PAC

Mailing Address Mr. David Bradley  
810 1st Street, NE, Ste 530

City State Zip Code  
Washington DC 20002

FEC ID number of contributing federal political committee. **C** C00163048

Name of Employer  
Community Action Pro

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33178

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **B.**

Full Name (Last, First, Middle Initial)

Cook Group Inc. PAC

Mailing Address Government Affairs Director  
901 New York Ave., NW, 3rd Floor

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00399089

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32950

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **C.**

Full Name (Last, First, Middle Initial)

Deere & Company PAC

Mailing Address Mr. William Behan  
1808 I Street, NW, 8th Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00204099

Name of Employer  
John Deere & Co PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C33003

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Deloitte & Touche PAC

Mailing Address Ms. Cindy M. Stevens

555 12th Street, NW, Ste 500

City

State

Zip Code

Washington

DC

20004-1207

FEC ID number of contributing  
federal political committee.

**C** C00211318

Name of Employer  
Deloitte & Touche PAC

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33188

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** DRS Technologies Good Government Fund

Mailing Address Mr. Steve Ansley

1755 S Jefferson Davis Hwy, Ste 11

City

State

Zip Code

Arlington

VA

22202

FEC ID number of contributing  
federal political committee.

**C** C00275123

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33010

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Emergency Dept Practice Management Assn

Mailing Address Ms. Cherilyn Cepriano

6849 Old Dominion Dr., Ste. 222

City

State

Zip Code

Mc Lean

VA

22101-3705

FEC ID number of contributing  
federal political committee.

**C** C00388470

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33179

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
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(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)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Emerson Electric Co. Responsible GovtMailing Address Mr. Robert McDonald  
700 13th Street, NW, Suite 700City State Zip Code  
Washington DC 20005-3960FEC ID number of contributing  
federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33175

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)  
Equipment Leasing Assn/LEASEPACMailing Address Mr. David Fenig  
4301 North Fairfax Drive, Ste 550City State Zip Code  
Arlington VA 22203-1608FEC ID number of contributing  
federal political committee. **C** C00132282Name of Employer Occupation  
Equipment/LEASEPACReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33154

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)  
ESOP PACMailing Address Mr. J. Michael Keeling  
1726 M Street, NW, Suite 501City State Zip Code  
Washington DC 20036FEC ID number of contributing  
federal political committee. **C** C00196089

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32955

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) ESOP PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 6	
Mailing Address Mr. J. Michael Keeling 1726 M Street, NW, Suite 501		<b>Transaction ID:</b> 60317.C33008	
City Washington State DC Zip Code 20036		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00196089		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 7000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Fed of Amer Hospitals PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address Ms. Jayne Hart Chambers 801 Pennsylvania Ave, NW, Suite 24		<b>Transaction ID:</b> 60317.C33199	
City Washington State DC Zip Code 20004-2604		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00002261		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Financial Serv Roundtable PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address The Honorable Steven Bartlett 1001 Pennsylvania Ave., Ste. 500 S		<b>Transaction ID:</b> 60405.C33454	
City Washington State DC Zip Code 20004		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00193177		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Financial Serv Roundtable PAC Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....

7000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Food Marketing Inst PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address Ms. Laura Bourne 655 15th Street NW, Ste. 700		<b>Transaction ID:</b> 60317.C33148
City Washington State DC Zip Code 20005-5701	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00014555	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Food Marketing Inst PAC Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>B.</b> Full Name (Last, First, Middle Initial) FuelCell Energy PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address Mr. Robert Brown 3 Great Pasture Road		<b>Transaction ID:</b> 60317.C33166
City Danbury State CT Zip Code 06813	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00204180	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 5000.00	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>C.</b> Full Name (Last, First, Middle Initial) FuelCell Energy PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address Mr. Robert Brown 3 Great Pasture Road		<b>Transaction ID:</b> 60317.C33165
City Danbury State CT Zip Code 06813	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00204180	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 5500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Receipts This Page (optional) .....

2000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** General Dynamics PAC

Mailing Address Mr. Ted Hack  
3190 Fairview Park Drive

City State Zip Code  
Falls Church VA 22042-4523

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer  
General Dynamics PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 3 / 2 0 0 6

Transaction ID: 60317.C33002

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** General Electric PAC

Mailing Address Ms. Lynn Harding Thomson  
1299 Pennsylvania Ave, NW, Ste. 11

City State Zip Code  
Washington DC 20004-2407

FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33158

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Genzyme Corporation PAC

Mailing Address Mary McGrane  
1020 19th Street, NW, Suite 550

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00393736

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33457

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Goodrich PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address Gerrie Bjornson 1100 Wilson Blvd., Ste. 900		<b>Transaction ID:</b> 60405.C33449	
City State Zip Code Arlington VA 22209		<b>Amount of Each Receipt this Period</b> 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00101725		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation BFGOODRICH PAC			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Hartford Advocates Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address Mr. Eric Thompson 1101 Connecticut Avenue, NW, Ste 4		<b>Transaction ID:</b> 60405.C33363	
City State Zip Code Washington DC 20036		<b>Amount of Each Receipt this Period</b> 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00168864		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) HCA Good Government Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6	
Mailing Address Mr. Vic Campbell One Park Plaza , PO Box 550		<b>Transaction ID:</b> 60405.C33212	
City State Zip Code Nashville TN 37202-0550		<b>Amount of Each Receipt this Period</b> 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00067231		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <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) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Healthsouth Corporation Mailing Address One Healthsouth Parkway City Birmingham State AL Zip Code 35243 FEC ID number of contributing federal political committee. <b>C</b> C00414649 Name of Employer Healthsouth Corporation Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33181 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Healthways, Inc. Federal PAC Mailing Address Government Affairs Director 3841 Green Hills Village Dr. City Nashville State TN Zip Code 37215 FEC ID number of contributing federal political committee. <b>C</b> C00411918 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33462 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Holland & Knight PAC Mailing Address Mr. Dave Metzger 2099 Pennsylvania Ave, NW, Suite 4 City Washington State DC Zip Code 20006-6801 FEC ID number of contributing federal political committee. <b>C</b> C00171330 Name of Employer Holland & Knight PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33221 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> 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**

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Human Rights Campaign PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address Mr. Michael Mings 1640 Rhode Island Ave, N.W.		<b>Transaction ID:</b> 60317.C33164
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00235853		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Human Rights Campaign PAC	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) ING America Insurance Holdings Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address Ms. Deborah Winston 1501 M Street, NW, Ste 430		<b>Transaction ID:</b> 60405.C33456
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00184028		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Intl Union of Operating Engineers(EPEC)		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address Mr. Tim James 1125 17th Street, NW		<b>Transaction ID:</b> 60317.C32988
City Washington State DC Zip Code 20036	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00029504		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer International Union of Operati	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Invacare Inc. PAC Mailing Address Mr. A. Malachi Mixon, III One Invacare Way City Elyria State OH Zip Code 44035 FEC ID number of contributing federal political committee. <b>C</b> C00249896 Name of Employer Invacare Inc. PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33169 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Johnson & Johnson Employees Good Govt F Mailing Address Ms. Yvette Williams 1350 I Street, NW, Ste 1210 City Washington State DC Zip Code 20005-3305 FEC ID number of contributing federal political committee. <b>C</b> C00010983 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 9000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33320 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Kindred Health Care Inc. PAC Mailing Address Mr. William Altman 680 South 4th Avenue, 1 Vencor Pla City Louisville State KY Zip Code 40202 FEC ID number of contributing federal political committee. <b>C</b> C00242271 Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 8500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 1 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33021 Amount of Each Receipt this Period 5000.00 <b>Receipt</b> <input type="checkbox"/> 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)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Kindred Health Care Inc. PAC

Mailing Address Mr. William Altman

680 South 4th Avenue, 1 Vencor Pla

City

State

Zip Code

Louisville

KY

40202

FEC ID number of contributing  
federal political committee.

**C** C00242271

Name of Employer

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 1 / 2 0 0 6

Transaction ID: 60317.C33017

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** KPMG Partners/Principals & Employees PAC

Mailing Address Mr. Scott McLucas

2001 M Street, NW

City

State

Zip Code

Washington

DC

20036-3389

FEC ID number of contributing  
federal political committee.

**C** C00280222

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33214

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Laboratory Corp. Amer Holdings PAC

Mailing Address P.O. Box 2230

City

State

Zip Code

Burlington

NC

27216

FEC ID number of contributing  
federal political committee.

**C** C00314997

Name of Employer  
Laboratory Corp. Am Holdi-  
ngs P

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33314

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
League of Conservation Voters Action FundMailing Address Ms. Betsy Loyless  
1920 L Street, NW, Ste 800City State Zip Code  
Washington DC 20036FEC ID number of contributing  
federal political committee. **C** C00252940

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33140

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)  
Liberty Mutual Ins PAC

Mailing Address 175 Berkeley Street

City State Zip Code  
Boston MA 02117FEC ID number of contributing  
federal political committee. **C**Name of Employer  
Liberty Mutual Ins PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33291

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)  
Lifepoint Hospitals Inc. PACMailing Address Mr. Bill Campbell  
103 Powell Court , Suite 200City State Zip Code  
Brentwood TN 37027FEC ID number of contributing  
federal political committee. **C** C00347955

Name of Employer

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33180

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**SUBTOTAL** of Receipts This Page (optional) .....

2250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lincoln National Corporation PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address Mr. James A. Morrill 1455 Pennsylvania Ave, NW, Ste 126		<b>Transaction ID:</b> 60317.C33173	
City Washington State DC Zip Code 20004		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00110577		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Mariner Health Care Inc. Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address Government Affairs Director 1 Ravinia Drive, Suite 1500		<b>Transaction ID:</b> 60317.C32951	
City Atlanta State GA Zip Code 30346		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00294371		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Mariner Post-Acute Net Fed PAC			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Medtronic Inc Medical Technology Fund		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address Mr. Pete Slone 1300 Pennsylvania Ave, NW, Ste 380		<b>Transaction ID:</b> 60317.C33152	
City Washington State DC Zip Code 20004		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00311878		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4000.00	

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 218

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) MetLife, Inc. PAC Mailing Address Ms. Janet Howard 1620 L Street, NW, Ste 800 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> C00040923 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60405.C33460 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Microsoft Corporation PAC Mailing Address Mr. John F. Sampson, Jr. 1401 I Street, NW, Ste 500 City Washington State DC Zip Code 20005 FEC ID number of contributing federal political committee. <b>C</b> C00227546 Name of Employer Microsoft Corp PAC Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33151 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Morgan Stanley PAC Mailing Address Mr. Samuel Baptista 401 Ninth Street, NW, Ste 650 City Washington State DC Zip Code 20004 FEC ID number of contributing federal political committee. <b>C</b> C00337626 Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60317.C33162 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 218

(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)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Clifford G. Leach Mailing Address 22 Cedar Ledge Road City State Zip Code W Hartford CT 06107 FEC ID number of contributing federal political committee. <b>C</b> <span style="border: 1px solid black; padding: 2px;">  </span> Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px; float: right;">100.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60405.C33322 Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; float: right;">100.00</span> Receipt <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	3		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	6												
<b>B.</b> Full Name (Last, First, Middle Initial) Natl Active & Retired Federal Empl. Ass Mailing Address Government Affairs Director 606 North Washington Street City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. <b>C</b> <span style="border: 1px solid black; padding: 2px;">C00091561</span> Name of Employer Occupation NARFE (National Association of Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px; float: right;">3000.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60317.C32987 Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; float: right;">2000.00</span> Receipt <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	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	6												
<b>C.</b> Full Name (Last, First, Middle Initial) Natl Assn Insurance & Financial Advisor Mailing Address Mr. Michael Kerley 2901 Telstar Court City State Zip Code Falls Church VA 22042-1205 FEC ID number of contributing federal political committee. <b>C</b> <span style="border: 1px solid black; padding: 2px;">C00005249</span> Name of Employer Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <span style="border: 1px solid black; padding: 2px; float: right;">2000.00</span>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60405.C33453 Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px; float: right;">1000.00</span> Receipt <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	3		3	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	1		2	0	0	6												

**SUBTOTAL** of Receipts This Page (optional) .....**3100.00****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Natl Assn of Chain Drug Stores		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address Samantha Galing 413 N. Lee Street		<b>Transaction ID:</b> 60405.C33459
City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00022368		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Natl Assoc of Chain Drug Stores	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Natl Assn of Health Underwriters		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address Mr. Tom Bruderle 2000 14th Street, North, Ste 450		<b>Transaction ID:</b> 60405.C33293
City Arlington State VA Zip Code 22201-2573	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00283135		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer National Association of Health	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Natl Assn of Home Builders PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address Scott Meyer 1201 15th Street NW		<b>Transaction ID:</b> 60405.C33479
City Washington State DC Zip Code 20005-2800	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00000901		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <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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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Natl Structured Settlements Trade Assn

Mailing Address Mr. Eric Vaughn  
1800 K Street, NW, Ste 718

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** C00219444

Name of Employer  
Ntl Structured Sett Assoc  
PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33316

Amount of Each Receipt this Period

3000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Natl Structured Settlements Trade Assn

Mailing Address Mr. Eric Vaughn  
1800 K Street, NW, Ste 718

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee. **C** C00219444

Name of Employer  
Ntl Structured Sett Assoc  
PAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
9000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33315

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Natl Venture Capital Assn

Mailing Address Mr. Mark G. Heesen  
1655 North Fort Myer Drive, Ste 85

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing  
federal political committee. **C** C00150367

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33190

Amount of Each Receipt this Period

1500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

9500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
National Assn. of Federal Credit UnionsMailing Address Ms. Ericka Anderson  
3138 N. 10th StreetCity State Zip Code  
Arlington VA 22201FEC ID number of contributing  
federal political committee. **C** C00040659

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33149

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)  
National Emergency Medicine PACMailing Address Ms. Laura Gans  
2121 K Street, NW, Suite 325City State Zip Code  
Washington DC 20037FEC ID number of contributing  
federal political committee. **C** C00140061Name of Employer Occupation  
Amer Coll of Em Physicians  
PACReceipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
5500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33170

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)  
National Emergency Medicine PACMailing Address Ms. Laura Gans  
2121 K Street, NW, Suite 325City State Zip Code  
Washington DC 20037FEC ID number of contributing  
federal political committee. **C** C00140061Name of Employer Occupation  
Amer Coll of Em Physicians  
PACReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33143

Amount of Each Receipt this Period

500.00

Receipt

☐ 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**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)

Northwestern Mutual Life Comp. PAC

Mailing Address Mr. Michael Youngman  
720 East Wisconsin Avenue

City State Zip Code  
Milwaukee WI 53202

FEC ID number of contributing federal political committee. **C** C00197095

Name of Employer  
Northwest Mutual Life PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33226

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

PAC for Employees of the Dow Chemical Co

Mailing Address Ms. Cindy Neuman  
2030 Dow Center

City State Zip Code  
Midland MI 48674

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33186

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Pacific Life Insurance Company PAC

Mailing Address Mr. Robert Haskell  
700 Newport Center Drive

City State Zip Code  
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33163

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Parsons Corporation		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6
Mailing Address Mr. Larry Shockley 1133 15th St., NW, Suite 800		<b>Transaction ID:</b> 60317.C33160
City Washington State DC Zip Code 20005-2701	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00103549	<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer PARSONS CORPORATION Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Pfizer Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address Ms. Marjorie Finkelburg 325 7th Street, NW, Ste 1200		<b>Transaction ID:</b> 60405.C33450
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00016683	<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Pfizer PAC Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 8000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Phoenix Compaines Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address Ms. Maura L. Melley One American Row		<b>Transaction ID:</b> 60317.C33080
City Hartford State CT Zip Code 06115	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00168203	<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Phoenix Home Life PAC Occupation		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Praxair Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address Mr. Thomas D. Finnigan 1200 G Street, NW, Ste 550		<b>Transaction ID:</b> 60317.C32932
City Washington State DC Zip Code 20005-3810	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00283440		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Praxair Inc. PAC	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Principal Life Insurance Company PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address Mr. Stuart Brahs 1350 I Street, NW, Ste 1030		<b>Transaction ID:</b> 60317.C32949
City Washington State DC Zip Code 20005-3305	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00128918		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Principal Life Insur Co PAC	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Principal Life Insurance Company PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6
Mailing Address Mr. Stuart Brahs 1350 I Street, NW, Ste 1030		<b>Transaction ID:</b> 60405.C33290
City Washington State DC Zip Code 20005-3305	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00128918		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Principal Life Insur Co PAC	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Procter & Gamble PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address Mr. Jim McCarthy 801 Pennsylvania Ave, NW, Ste 720		<b>Transaction ID:</b> 60317.C33174	
City State Zip Code Washington DC 20004-2604		<b>Amount of Each Receipt this Period</b> 1000.00	
FEC ID number of contributing federal political committee. <b>C</b> C00257329		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Procter & Gamble PAC		Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	
<b>B.</b> Full Name (Last, First, Middle Initial) Prudential Financial Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6	
Mailing Address Mr. Chris Payne 1140 Connecticut Avenue, NW, Ste 5		<b>Transaction ID:</b> 60317.C33195	
City State Zip Code Washington DC 20036		<b>Amount of Each Receipt this Period</b> 2500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00127779		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Prudential Insur Co. PAC		Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 5000.00	
<b>C.</b> Full Name (Last, First, Middle Initial) Quest Diagnostics Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address Ms. Kristen Cusick 815 Connecticut Ave, NW, Ste 330		<b>Transaction ID:</b> 60317.C32933	
City State Zip Code Washington DC 20006		<b>Amount of Each Receipt this Period</b> 500.00	
FEC ID number of contributing federal political committee. <b>C</b> C00329185		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Quest Diagnostics Emp PAC		Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4500.00	

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Quest Diagnostics Inc. PAC

Mailing Address Ms. Kristen Cusick  
815 Connecticut Ave, NW, Ste 330

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00329185

Name of Employer  
Quest Diagnostics Emp PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33446

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Reed Smith PAC

Mailing Address Mr. Phillips Peter  
1301 K Street, NW, Ste 1100 East T

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00242057

Name of Employer  
Reed Smith PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33168

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Republican Majority for Choice PAC

Mailing Address Ms. Maureen Doherty  
1660 L Street, Ste. 609

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00346635

Name of Employer

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32983

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sanofi Pasteur PAC

Mailing Address Mr. Sean Callinicos

801 Pennsylvania Ave., NW, Ste. 72

City

State

Zip Code

Washington

DC

20004-2615

FEC ID number of contributing  
federal political committee.

**C** C00215236

Name of Employer  
Connaught Labs PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33161

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Sheet Metal & Air Conditioning PAC

Mailing Address Dana Thompson

305 4th Street, NE

City

State

Zip Code

Washington

DC

20002

FEC ID number of contributing  
federal political committee.

**C** C00013961

Name of Employer  
SMAC PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33451

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Sheet Metal & Air Conditioning PAC

Mailing Address Dana Thompson

305 4th Street, NE

City

State

Zip Code

Washington

DC

20002

FEC ID number of contributing  
federal political committee.

**C** C00013961

Name of Employer  
SMAC PAC

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60405.C33452

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Society of Thoracic Surgeons/STS-PAC

Mailing Address Mr. Michael Hogan  
1025 Connecticut Avenue, NW, Ste 1

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee. **C** C00325936

Name of Employer  
Society of Thoracic Surgeons PA

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33150

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)

Tenet Healthcare Corp. PAC

Mailing Address 3820 State Street

City State Zip Code  
Santa Barbara CA 93105

FEC ID number of contributing  
federal political committee. **C** C00119354

Name of Employer  
Tenet Healthcare Corp. PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33193

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)

Torchmark Corp

Mailing Address Mr. Stephen Still  
2001 Third Avenue South

City State Zip Code  
Birmingham AL 35233

FEC ID number of contributing  
federal political committee. **C** C00167460

Name of Employer  
Torchmark Corp PAC

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33167

Amount of Each Receipt this Period

1000.00

Receipt

☐ 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**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Triad Good Government Fund

Mailing Address 13455 Noel Road

City State Zip Code  
 Dallas TX 75240

FEC ID number of contributing federal political committee.

**C** C00347062Name of Employer  
Triad Good Government Fund

Occupation

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33197

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

United Technologies Corp. PAC

Mailing Address Mr. Mark Fernald  
1401 I Street, NW, Ste 500

City State Zip Code  
 Washington DC 20005-2204

FEC ID number of contributing federal political committee.

**C** C00035683

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33156

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

UnitedHealth Group Inc PAC

Mailing Address Ms. Elise Gemeinhardt  
1225 New York Avenue, NW, Ste 475

City State Zip Code  
 Washington DC 20005

FEC ID number of contributing federal political committee.

**C** C00274431Name of Employer  
United Health Group Inc  
PAC

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 2 / 2 0 0 6

Transaction ID: 60405.C33297

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

5500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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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)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Vanguard Health Management Inc. PAC
Mailing Address Government Relations Director  
20 Burton Hills Blvd., Ste. 100City State Zip Code  
Nashville TN 37215-6154FEC ID number of contributing  
federal political committee. **C** C00380402

Name of Employer Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
7000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33194

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.** Full Name (Last, First, Middle Initial)  
VHA PAC
Mailing Address Mr. Duanne Pearson  
220 E. Las Colinal Blvd.City State Zip Code  
Irving TX 75039-5500FEC ID number of contributing  
federal political committee. **C** C00199497

Name of Employer Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: 60317.C33155

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.** Full Name (Last, First, Middle Initial)  
Webster Bank Federal PAC
Mailing Address Mr. Arthur H. House  
145 Bank Street, Webster PlazaCity State Zip Code  
Waterbury CT 06720FEC ID number of contributing  
federal political committee. **C** C00321406Name of Employer Occupation  
Webster Bank Fed PACReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60317.C32982

Amount of Each Receipt this Period

500.00

Receipt

☐ 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)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Wellpoint Inc. WELLPAC

Mailing Address 120 Monument Circle

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing  
federal political committee.

**C** C00197228

Name of Employer  
Wellpoint WELLPAC

Occupation

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32917

Amount of Each Receipt this Period

3000.00

Receipt

☐ 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) .....

201100.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
Travelers Remittance CentMailing Address One Tower Square  
4 Main NorthCity State Zip Code  
Hartford CT 06183-FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Travelers Remittance Cent-  
er

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32958

Amount of Each Receipt this Period

201.00

Offsets to Operating Expe-  
nditu☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)  
Verizon Wireless

Mailing Address P.O. Box 17120

City State Zip Code  
Tucson AZ 85731-7120FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Verizon Wireless

Occupation

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

413.15

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 0 6

Transaction ID: 60317.C32960

Amount of Each Receipt this Period

413.15

Offsets to Operating Expe-  
nditu☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

614.15

TOTAL This Period (last page this line number only) .....

614.15

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Webster Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 2 / 2 0 0 6
Mailing Address 435 South Main Street		<b>Transaction ID:</b> 60405.C33310
City New Britain	State CT	Zip Code 06051-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11103.19
Name of Employer	Occupation	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 21347.57	
<b>B.</b> Full Name (Last, First, Middle Initial) Webster Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6
Mailing Address 435 South Main Street		<b>Transaction ID:</b> 60405.C33511
City New Britain	State CT	Zip Code 06051-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 840.00
Name of Employer	Occupation	Other Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 22187.57	

**SUBTOTAL** of Receipts This Page (optional) .....

11943.19

**TOTAL** This Period (last page this line number only) .....

11943.19



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Admin./Unemployment Compe**

Mailing Address P.O.Box 2931

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
UNEMPLOYMENT TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3850

Date of Disbursement

/   /

Amount of Each Disbursement this Period

463.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UNEMPLOYMENT TAXES

Full Name (Last, First, Middle Initial)

## **B. American ViewPoint**

Mailing Address 300 N. Lee Street, Ste. 400

City  
Alexandria

State  
VA

Zip Code  
22314-

Purpose of Disbursement  
POLLING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3823

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18400.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POLLING

Full Name (Last, First, Middle Initial)

## **C. Anthem Blue Cross & Blue Shield of Ct.**

Mailing Address Ms. Emily Smith  
370 Basset Rd.

City  
North Haven

State  
CT

Zip Code  
06473-

Purpose of Disbursement  
CATEROMG

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60407.E4023

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1060.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATEROMG

**SUBTOTAL** of Disbursements This Page (optional) .....

19923.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Automated Mailmen**

Mailing Address 141 South Main Street

City Beacon Falls State CT Zip Code 06403-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3824

Date of Disbursement

/   /

Amount of Each Disbursement this Period

464.55

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. CT Assn. of Health Care Facilities**

Mailing Address 99 E. River Drive

City East Hartford State CT Zip Code 06108-

Purpose of Disbursement  
FUNDRAISER DEPOSIT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3959

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1187.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISER DEPOSIT

Full Name (Last, First, Middle Initial)

## **C. Capitol Hill Club**

Mailing Address 300 First 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: 60405.E3826

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1805.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

3458.26

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Capitol Hill Club**

Mailing Address 300 First 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: 60405.E3898

Date of Disbursement

02 / 27 / 2006

Amount of Each Disbursement this Period

410.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

## **B. Capitol Hill Club**

Mailing Address 300 First 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: 60405.E3924

Date of Disbursement

03 / 13 / 2006

Amount of Each Disbursement this Period

514.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

Full Name (Last, First, Middle Initial)

## **C. Capitol Hill Club**

Mailing Address 300 First Street, SE

City Washington State DC Zip Code 20003-

Purpose of Disbursement  
CATERING - 3/7/06 EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3948

Date of Disbursement

03 / 20 / 2006

Amount of Each Disbursement this Period

3950.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING - 3/7/06 EVENT

**SUBTOTAL** of Disbursements This Page (optional) .....

4875.97

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Capstone Properties**

Mailing Address 101 Cambridge Ave, Suite 310

City  
Burlington

State  
MA

Zip Code  
01803-

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3846

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3900.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

## **B. Capstone Properties**

Mailing Address 101 Cambridge Ave, Suite 310

City  
Burlington

State  
MA

Zip Code  
01803-

Purpose of Disbursement  
RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3913

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1850.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

## **C. City of New Britain**

Mailing Address 27 West Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3845

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

**SUBTOTAL** of Disbursements This Page (optional) .....

5850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3866

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3885

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3900

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3915

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

Full Name (Last, First, Middle Initial)

**B.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
PARKING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3943

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PARKING

Full Name (Last, First, Middle Initial)

**C.** City of New Britain

Mailing Address 27 West Main Street

City New Britain State CT Zip Code 06051-

Purpose of Disbursement  
SMART CARD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3957

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SMART CARD

**SUBTOTAL** of Disbursements This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** CL&P

Mailing Address PO Box 270

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3822

Date of Disbursement

/   /

Amount of Each Disbursement this Period

380.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

Full Name (Last, First, Middle Initial)

**B.** CL&P

Mailing Address PO Box 270

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3828

Date of Disbursement

/   /

Amount of Each Disbursement this Period

659.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

Full Name (Last, First, Middle Initial)

**C.** CL&P

Mailing Address PO Box 270

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3914

Date of Disbursement

/   /

Amount of Each Disbursement this Period

303.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

**SUBTOTAL** of Disbursements This Page (optional) .....

1344.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** CL&P

Mailing Address PO Box 270

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
UTILITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3956

Date of Disbursement

/   /

Amount of Each Disbursement this Period

578.65

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

UTILITIES

Full Name (Last, First, Middle Initial)

**B.** Mr. Lester Cooper

Mailing Address 3539 South Utah Street

City  
Arlington

State  
VA

Zip Code  
22206-

Purpose of Disbursement  
RESEARCH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3961

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3281.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RESEARCH

Full Name (Last, First, Middle Initial)

**C.** Mr. Lester Cooper

Mailing Address 3539 South Utah Street

City  
Arlington

State  
VA

Zip Code  
22206-

Purpose of Disbursement  
RESEARCH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3939

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3656.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RESEARCH

**SUBTOTAL** of Disbursements This Page (optional) .....

7516.15

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Cornucopia Banqueting Hall**

Mailing Address 371 Pinewoods Road

City  
Torrington

State  
CT

Zip Code  
06790-

Purpose of Disbursement  
DEPOSIT ON CONVENTION SITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3892

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

DEPOSIT ON CONVENTION SITE

Full Name (Last, First, Middle Initial)

## **B. CT Commissioner of Revenue Services**

Mailing Address P.O.Box 2931

City  
Hartford

State  
CT

Zip Code  
06104-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3851

Date of Disbursement

/   /

Amount of Each Disbursement this Period

211.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

## **C. Davis, Mascola, and Phillips**

Mailing Address 1062 Barnes Road  
ste 203

City  
Wallingford

State  
CT

Zip Code  
06492-

Purpose of Disbursement  
ACCOUNTING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3821

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ACCOUNTING SERVICES

**SUBTOTAL** of Disbursements This Page (optional) .....

771.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Davis, Mascola, and Phillips

Mailing Address 1062 Barnes Road  
ste 203

City Wallingford State CT Zip Code 06492-

Purpose of Disbursement  
ACCOUNTING SERVICES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3930

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ACCOUNTING SERVICES

Full Name (Last, First, Middle Initial)

**B.** Federal Express

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3816

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

**C.** Federal Express

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3839

Date of Disbursement

/   /

Amount of Each Disbursement this Period

16.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

320.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3844

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3883

Date of Disbursement

/   /

Amount of Each Disbursement this Period

153.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3894

Date of Disbursement

/   /

Amount of Each Disbursement this Period

52.94

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

221.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3908

Date of Disbursement

03 / 02 / 2006

Amount of Each Disbursement this Period

75.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3921

Date of Disbursement

03 / 09 / 2006

Amount of Each Disbursement this Period

15.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **C. Federal Express**

Mailing Address P.O.Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3945

Date of Disbursement

03 / 17 / 2006

Amount of Each Disbursement this Period

72.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

**SUBTOTAL** of Disbursements This Page (optional) .....

163.47

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Federal Express**

Mailing Address P.O.Box 1140

City  
Memphis

State  
TN

Zip Code  
38101-1140

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3954

Date of Disbursement

/   /

Amount of Each Disbursement this Period

58.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Donna Hamzy**

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3899

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

Full Name (Last, First, Middle Initial)

## **C. Donna Hamzy**

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3907

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

342.65

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3935

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1623.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE - SUPPLIES FROM STAPLES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3947

Date of Disbursement

/   /

Amount of Each Disbursement this Period

88.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - SUPPLIES FROM  
STAPLES

Full Name (Last, First, Middle Initial)

**C.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3951

Date of Disbursement

/   /

Amount of Each Disbursement this Period

254.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

**SUBTOTAL** of Disbursements This Page (optional) .....

1966.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Donna Hamzy

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3952

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Hartford Club

Mailing Address 46 Prospect Street

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
CATERING - TRAV FUNDRAISER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3814

Date of Disbursement

/   /

Amount of Each Disbursement this Period

725.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING - TRAV FUNDRAISER

Full Name (Last, First, Middle Initial)

**C.** Hartford Club

Mailing Address 46 Prospect Street

City  
Hartford

State  
CT

Zip Code  
06103-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3829

Date of Disbursement

/   /

Amount of Each Disbursement this Period

725.45

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

1506.75

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Hartford Magazine

Mailing Address unknown

City  
Hartford

State  
CT

Zip Code  
06101-

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3842

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ADVERTISING

Full Name (Last, First, Middle Initial)

**B.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City  
Canton

State  
CT

Zip Code  
06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3837

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1266.17

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City  
Canton

State  
CT

Zip Code  
06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3874

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4964.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

6930.81

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City  
Canton

State  
CT

Zip Code  
06019-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3916

Date of Disbursement

/   /

Amount of Each Disbursement this Period

41.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

Full Name (Last, First, Middle Initial)

**B.** Mr. Kenneth Hiscoe

Mailing Address 11 Michael Drive

City  
Canton

State  
CT

Zip Code  
06019-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3926

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4964.64

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Internal Revenue Service

Mailing Address Main Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3847

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1670.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

6676.24

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Internal Revenue Service**

Mailing Address Main Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
940 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3848

Date of Disbursement

/   /

Amount of Each Disbursement this Period

137.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

940 TAXES

Full Name (Last, First, Middle Initial)

## **B. Internal Revenue Service**

Mailing Address Main Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
941 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3849

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1735.77

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

941 TAXES

Full Name (Last, First, Middle Initial)

## **C. Internal Revenue Service**

Mailing Address Main Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
1120-POL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3925

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1521.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

1120-POL TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

3394.79

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Internet Campaign Solutions**

Mailing Address 1600 Wilson Blvd.

City  
Arlington

State  
VA

Zip Code  
22209-

Purpose of Disbursement  
WEBPAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3840

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WEBPAGE

Full Name (Last, First, Middle Initial)

## **B. David Kloth**

Mailing Address 2 Mountain View Terrace, Aptl 1132

City  
Danbury

State  
CT

Zip Code  
06810-

Purpose of Disbursement  
REIMBURSE - EMAILS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3958

Date of Disbursement

/   /

Amount of Each Disbursement this Period

31.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - EMAILS

Full Name (Last, First, Middle Initial)

## **C. MCI**

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3881

Date of Disbursement

/   /

Amount of Each Disbursement this Period

129.27

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

561.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** MCI

Mailing Address P.O.Box 856053

City  
Louisville

State  
KY

Zip Code  
40285-6053

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3931

Date of Disbursement

/   /

Amount of Each Disbursement this Period

405.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3836

Date of Disbursement

/   /

Amount of Each Disbursement this Period

685.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3870

Date of Disbursement

/   /

Amount of Each Disbursement this Period

685.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

1776.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. John P. Miller

Mailing Address 45 Blue Ridge Drive

City  
Weatogue

State  
CT

Zip Code  
06089-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3928

Date of Disbursement

/   /

Amount of Each Disbursement this Period

685.62

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City  
Herndon

State  
VA

Zip Code  
20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3819

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12449.07

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**C.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City  
Herndon

State  
VA

Zip Code  
20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3831

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3736.93

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

16871.62

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3838

Date of Disbursement

01 / 12 / 2006

Amount of Each Disbursement this Period

5367.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**B.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3867

Date of Disbursement

02 / 03 / 2006

Amount of Each Disbursement this Period

5307.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**C.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3909

Date of Disbursement

03 / 03 / 2006

Amount of Each Disbursement this Period

4692.79

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

**SUBTOTAL** of Disbursements This Page (optional) .....

15366.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3918

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2755.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**B.** Morgan, Meredith & Associates

Mailing Address 2875 Towerview Road, Suite 1000

City Herndon State VA Zip Code 20171-

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3938

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2716.48

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

**C.** New Britain Museum of Ame

Mailing Address 56 Lexington Street

City New Britain State CT Zip Code 06053-

Purpose of Disbursement  
AD BOOK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3901

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AD BOOK

**SUBTOTAL** of Disbursements This Page (optional) .....

5771.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. New Britain Museum of Ame**

Mailing Address 56 Lexington Street

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3937

Date of Disbursement

/   /

Amount of Each Disbursement this Period

585.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ADVERTISING

Full Name (Last, First, Middle Initial)

## **B. Michael Novogradac**

Mailing Address 246 1st Street Suite 500

City  
San Francisco

State  
CA

Zip Code  
94105-

Purpose of Disbursement  
REIMBURSE - CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3864

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2398.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - CATERING

Full Name (Last, First, Middle Initial)

## **C. Mr. David OConnell**

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3834

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2430.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

5413.56

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE - CLEANING SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3855

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - CLEANING SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
TRAVEL REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3865

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL REIMBURSEMENT

Full Name (Last, First, Middle Initial)

**C.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3875

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

148.33

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PAYROL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2430.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROL

Full Name (Last, First, Middle Initial)

**B.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE - COPIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3880

Date of Disbursement

/   /

Amount of Each Disbursement this Period

220.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - COPIES

Full Name (Last, First, Middle Initial)

**C.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3882

Date of Disbursement

/   /

Amount of Each Disbursement this Period

43.30

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

2693.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Mr. David OConnell

Mailing Address 102 Eddy Lane

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3927

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1867.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Office Works

Mailing Address 45 Corporate Avenue

City  
Plainville

State  
CT

Zip Code  
06062-

Purpose of Disbursement  
COPIER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3854

Date of Disbursement

/   /

Amount of Each Disbursement this Period

310.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COPIER RENTAL

Full Name (Last, First, Middle Initial)

**C.** Office Works

Mailing Address 45 Corporate Avenue

City  
Plainville

State  
CT

Zip Code  
06062-

Purpose of Disbursement  
TOSHIBA COPIER RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3903

Date of Disbursement

/   /

Amount of Each Disbursement this Period

310.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TOSHIBA COPIER RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

2487.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Office Works**

Mailing Address 45 Corporate Avenue

City  
Plainville

State  
CT

Zip Code  
06062-

Purpose of Disbursement  
TOSHIBA COPIER METER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3902

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TOSHIBA COPIER METER

Full Name (Last, First, Middle Initial)

## **B. John Perkins**

Mailing Address 43 East Shore Road

City  
Stonington

State  
CT

Zip Code  
06378-

Purpose of Disbursement  
CATERING FOR BURKE DOAR EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60317.C33201IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1071.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: CATERING FOR BUR-  
KE DOAR EVENT

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
NO EXPENDITURES MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3832

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURES MORE THAN  
\$100

**SUBTOTAL** of Disbursements This Page (optional) .....

1176.54

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Petty Cash**

Mailing Address 212 Main Street

City State Zip Code  
New Britain CT 06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3857

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **B. Petty Cash**

Mailing Address 212 Main Street

City State Zip Code  
New Britain CT 06050-

Purpose of Disbursement  
NO EXPENDITURE MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3891

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE MORE THAN  
\$100

Full Name (Last, First, Middle Initial)

## **C. Petty Cash**

Mailing Address 212 Main Street

City State Zip Code  
New Britain CT 06050-

Purpose of Disbursement  
NO EXPENDITURE FOR MORE THAN \$100

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3922

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

NO EXPENDITURE FOR MORE  
THAN \$100

**SUBTOTAL** of Disbursements This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Potomac Design**

Mailing Address 4917 N 35th Street

City  
Arlington

State  
VA

Zip Code  
22207-

Purpose of Disbursement  
REDESIGN WEBSITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3923

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REDESIGN WEBSITE

Full Name (Last, First, Middle Initial)

## **B. Potomac Design**

Mailing Address 4917 N 35th Street

City  
Arlington

State  
VA

Zip Code  
22207-

Purpose of Disbursement  
WEBSITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3950

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3300.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WEBSITE

Full Name (Last, First, Middle Initial)

## **C. Preferred Communications**

Mailing Address 5201 Leesburg Rd

City  
Falls Church

State  
VA

Zip Code  
22041-

Purpose of Disbursement  
LIST RENTAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3919

Date of Disbursement

/   /

Amount of Each Disbursement this Period

485.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

LIST RENTAL

**SUBTOTAL** of Disbursements This Page (optional) .....

7085.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTERS & CONSULTING - DEPOSIT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3841

Date of Disbursement

01 / 17 / 2006

Amount of Each Disbursement this Period

2725.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTERS & CONSULTING -  
DEPOSIT

Full Name (Last, First, Middle Initial)

## **B. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER CONSULTING PARTS LABOR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3859

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

1022.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER CONSULTING PARTS  
LABOR

Full Name (Last, First, Middle Initial)

## **C. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER ORDER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3877

Date of Disbursement

02 / 14 / 2006

Amount of Each Disbursement this Period

1215.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER ORDER

**SUBTOTAL** of Disbursements This Page (optional) .....

4962.60

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
COMPUTER HOOK-UP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3895

Date of Disbursement

/   /

Amount of Each Disbursement this Period

293.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER HOOK-UP

Full Name (Last, First, Middle Initial)

## **B. Premier Computer Solutions**

Mailing Address 9730 Patuxent Woods Drive

City Columbia State MD Zip Code 21045-

Purpose of Disbursement  
WORKSTATION SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3910

Date of Disbursement

/   /

Amount of Each Disbursement this Period

111.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WORKSTATION SERVICE

Full Name (Last, First, Middle Initial)

## **C. RBS**

Mailing Address P. O. Box 42010

City Providence State RI Zip Code 02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3830

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1626.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

2031.42

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Ciao Cafe

Mailing Address 2B Ives Street

City  
Danbury

State  
CT

Zip Code  
06810-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3966

Date of Disbursement

/   /

Amount of Each Disbursement this Period

490.87

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

**B.** Stop & Shop

Mailing Address 1309 Corbin Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3975

Date of Disbursement

/   /

Amount of Each Disbursement this Period

77.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

**C.** AOL Service

Mailing Address TWX\*AOL Service

City  
Ashburn

State  
VA

Zip Code  
20147-

Purpose of Disbursement  
INTERNET SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3967

Date of Disbursement

/   /

Amount of Each Disbursement this Period

23.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: INTERNET SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Topica, Inc.

Mailing Address 620 Folsom Street, #3

City  
San Francisco

State  
CA

Zip Code  
94107-

Purpose of Disbursement  
CAMPAIGN EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3965

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CAMPAIGN EXPENSE

Full Name (Last, First, Middle Initial)

**B.** U.S. Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102-

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL

Full Name (Last, First, Middle Initial)

**C.** U.S. Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102-

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3968

Date of Disbursement

/   /

Amount of Each Disbursement this Period

536.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** U.S. Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102-

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL

Full Name (Last, First, Middle Initial)

**B.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3860

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3866.82

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

Full Name (Last, First, Middle Initial)

**C.** Carbones Restaurant

Mailing Address 588 Franklin Avenue

City  
Hartford

State  
CT

Zip Code  
06114-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3996

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1500.14

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

3866.82

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** ExxonMobil

Mailing Address 724 Cedar Street

City  
Newington

State  
CT

Zip Code  
06111-

Purpose of Disbursement  
GASOLINE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3992

Date of Disbursement

/   /

Amount of Each Disbursement this Period

42.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: GASOLINE

Full Name (Last, First, Middle Initial)

**B.** Great Taste Chinese Restaurant

Mailing Address 597 W. Main Street

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

186.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

**C.** Officers Club of Connecticut

Mailing Address 720 Wolcott Street

City  
Waterbury

State  
CT

Zip Code  
06705-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3994

Date of Disbursement

/   /

Amount of Each Disbursement this Period

30.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. AOL Service**

Mailing Address TWX\*AOL Service

City Ashburn State VA Zip Code 20147-

Purpose of Disbursement  
INTERNET SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3983

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

23.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

## **B. Topica, Inc.**

Mailing Address 620 Folsom Street, #3

City San Francisco State CA Zip Code 94107-

Purpose of Disbursement  
CAMPAIGN EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3980

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

49.95

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CAMPAIGN EXPENSE

Full Name (Last, First, Middle Initial)

## **C. Topica, Inc.**

Mailing Address 620 Folsom Street, #3

City San Francisco State CA Zip Code 94107-

Purpose of Disbursement  
CAMPAIGN EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3979

Date of Disbursement

01 / 31 / 2006

Amount of Each Disbursement this Period

142.21

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CAMPAIGN EXPENSE

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** VWH

Mailing Address unknown

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
WEB HOSTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3995

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: WEB HOSTING

Full Name (Last, First, Middle Initial)

**B.** Verizon Wireless

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
CELL PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3993

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CELL PHONE

Full Name (Last, First, Middle Initial)

**C.** Verizon Wireless

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
CELL PHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3986

Date of Disbursement

/   /

Amount of Each Disbursement this Period

168.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CELL PHONE

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Winbook

Mailing Address unknown

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
COMPUTER SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: COMPUTER SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Winbook

Mailing Address unknown

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
COMPUTER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3982

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1218.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: COMPUTER

Full Name (Last, First, Middle Initial)

**C.** RBS

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E4019

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6262.81

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

6262.81

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Best Buy**

Mailing Address 10801 Red Circle Drive

City  
Hopkins

State  
MN

Zip Code  
55343-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3999

Date of Disbursement

/   /

Amount of Each Disbursement this Period

325.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Circa Bistro**

Mailing Address 92 Bank Street

City  
Waterbury

State  
CT

Zip Code  
06702-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4009

Date of Disbursement

/   /

Amount of Each Disbursement this Period

221.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

## **C. Marriott Hotel**

Mailing Address 63 Grand Street

City  
Bridgeport

State  
CT

Zip Code  
06107-

Purpose of Disbursement  
MEETING ROOM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4001

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.22

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: MEETING ROOM

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Marriott Hotel**

Mailing Address 63 Grand Street

City  
Bridgeport

State  
CT

Zip Code  
06107-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

59.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

## **B. Marriott Hotel**

Mailing Address 63 Grand Street

City  
Bridgeport

State  
CT

Zip Code  
06107-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4005

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1256.28

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

## **C. Office Max**

Mailing Address 600 Hartford Road

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4008

Date of Disbursement

/   /

Amount of Each Disbursement this Period

432.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Office Max**

Mailing Address 600 Hartford Road

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4014

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

## **B. Pettibone Tavern**

Mailing Address 4 Hartford Road

City  
Simsbury

State  
CT

Zip Code  
06070-

Purpose of Disbursement  
CATERING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4002

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1123.74

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CATERING

Full Name (Last, First, Middle Initial)

## **C. RBS**

Mailing Address P. O. Box 42010

City  
Providence

State  
RI

Zip Code  
02940-2010

Purpose of Disbursement  
MEMBERSHIP FEE - ANNUAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: MEMBERSHIP FEE - AN-  
NUAL

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Stop & Shop**

Mailing Address 1309 Corbin Ave.

City  
New Britain

State  
CT

Zip Code  
06053-

Purpose of Disbursement  
FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4007

Date of Disbursement

/   /

Amount of Each Disbursement this Period

35.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: FOOD & BEVERAGE

Full Name (Last, First, Middle Initial)

## **B. AOL Service**

Mailing Address TWX\*AOL Service

City  
Ashburn

State  
VA

Zip Code  
20147-

Purpose of Disbursement  
INTERNET SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E4000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

23.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: INTERNET SERVICE

Full Name (Last, First, Middle Initial)

## **C. The Congressional Institute**

Mailing Address 316 Pennsylvania Ave SE #403

City  
Washington

State  
DC

Zip Code  
20003-

Purpose of Disbursement  
SEMINAR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

943.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: SEMINAR

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Topica, Inc.

Mailing Address 620 Folsom Street, #3

City  
San Francisco

State  
CA

Zip Code  
94107-

Purpose of Disbursement  
CAMPAIGN EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3997

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.96

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: CAMPAIGN EXPENSE

Full Name (Last, First, Middle Initial)

**B.** UNITED AIRLINES INC.

Mailing Address P.O. Box 66423

City  
Chicago

State  
IL

Zip Code  
60666-

Purpose of Disbursement  
TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E4004

Date of Disbursement

/   /

Amount of Each Disbursement this Period

558.59

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: TRAVEL

Full Name (Last, First, Middle Initial)

**C.** Midcom Data Technology

Mailing Address 800 Welch Road

City  
Walled Lake

State  
MI

Zip Code  
48390-

Purpose of Disbursement  
OFFICE TELEPHONES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E4016

Date of Disbursement

/   /

Amount of Each Disbursement this Period

513.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

MEMO: OFFICE TELEPHONES

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Christopher Rovero

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3934

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1612.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** SBC

Mailing Address P.O. Box 1861

City  
New Haven

State  
CT

Zip Code  
06508-0901

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3825

Date of Disbursement

/   /

Amount of Each Disbursement this Period

600.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** SBC

Mailing Address P.O. Box 1861

City  
New Haven

State  
CT

Zip Code  
06508-0901

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3843

Date of Disbursement

/   /

Amount of Each Disbursement this Period

267.93

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

2479.93

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** SBC

Mailing Address P.O. Box 1861

City  
New HavenState  
CTZip Code  
06508-0901Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3878

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	6

Amount of Each Disbursement this Period

406.57

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**B.** SBC

Mailing Address P.O. Box 1861

City  
New HavenState  
CTZip Code  
06508-0901Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3932

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	3		2	0	0	6

Amount of Each Disbursement this Period

920.13

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New BritainState  
CTZip Code  
06051-Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3861

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	6

Amount of Each Disbursement this Period

110.35

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

**SUBTOTAL** of Disbursements This Page (optional) .....

1437.05

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
BUSINESS CARDS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3876

Date of Disbursement

/   /

Amount of Each Disbursement this Period

79.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

BUSINESS CARDS

Full Name (Last, First, Middle Initial)

## **B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3884

Date of Disbursement

/   /

Amount of Each Disbursement this Period

385.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

Full Name (Last, First, Middle Initial)

## **C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING BUSINESS CARDS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 60405.E3888

Date of Disbursement

/   /

Amount of Each Disbursement this Period

238.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING BUSINESS CARDS

**SUBTOTAL** of Disbursements This Page (optional) .....

703.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING ENVELOPES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3890

Date of Disbursement

/   /

Amount of Each Disbursement this Period

337.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING ENVELOPES

Full Name (Last, First, Middle Initial)

**B.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING FIELD PLAN

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3897

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING FIELD PLAN

Full Name (Last, First, Middle Initial)

**C.** Sir Speedy Printing

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3893

Date of Disbursement

/   /

Amount of Each Disbursement this Period

97.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

**SUBTOTAL** of Disbursements This Page (optional) .....

498.10

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Sir Speedy Printing**

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING INVITATIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3906

Date of Disbursement

/   /

Amount of Each Disbursement this Period

56.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING INVITATIONS

Full Name (Last, First, Middle Initial)

## **B. Sir Speedy Printing**

Mailing Address 200 Main Street

City  
New Britain

State  
CT

Zip Code  
06051-

Purpose of Disbursement  
PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

356.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PRINTING

Full Name (Last, First, Middle Initial)

## **C. Solv It**

Mailing Address 835 New Harwinton Road

City  
Torrington

State  
CT

Zip Code  
06790-

Purpose of Disbursement  
ELECTRICAL WORK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3960

Date of Disbursement

/   /

Amount of Each Disbursement this Period

209.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ELECTRICAL WORK

**SUBTOTAL** of Disbursements This Page (optional) .....

621.88

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Erin Stewart

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3942

Date of Disbursement

/   /

Amount of Each Disbursement this Period

253.56

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Mohammed Syed

Mailing Address 19 Dover Road

City  
New Britain

State  
CT

Zip Code  
06052-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3941

Date of Disbursement

/   /

Amount of Each Disbursement this Period

277.05

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3835

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1720.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

**SUBTOTAL** of Disbursements This Page (optional) .....

2251.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3863

Date of Disbursement

/   /

Amount of Each Disbursement this Period

74.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**B.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3868

Date of Disbursement

/   /

Amount of Each Disbursement this Period

223.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREMIUM

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE - TRAVEL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3869

Date of Disbursement

/   /

Amount of Each Disbursement this Period

78.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - TRAVEL

**SUBTOTAL** of Disbursements This Page (optional) .....

375.85

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1617.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
REIMBURSE - OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3887

Date of Disbursement

/   /

Amount of Each Disbursement this Period

48.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

REIMBURSE - OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

**C.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PICTURES AT LEAVITT EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 60405.E3905

Date of Disbursement

/   /

Amount of Each Disbursement this Period

65.67

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PICTURES AT LEAVITT EVENT

**SUBTOTAL** of Disbursements This Page (optional) .....

1731.63

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
PAYROLL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3929

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1617.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PAYROLL

Full Name (Last, First, Middle Initial)

**B.** Michael Tellerico

Mailing Address PO Box 1986

City  
New Britain

State  
CT

Zip Code  
06050-

Purpose of Disbursement  
HEALTH CARE COVERAGE PREMIUM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3949

Date of Disbursement

/   /

Amount of Each Disbursement this Period

160.99

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

HEALTH CARE COVERAGE PREM-  
IUM

Full Name (Last, First, Middle Initial)

**C.** Tuttle and Tuttle

Mailing Address 12 Fort Williams Parkway

City  
Alexandria

State  
VA

Zip Code  
22304-

Purpose of Disbursement  
CHRISTMAS CARDS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3817

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2615.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CHRISTMAS CARDS

**SUBTOTAL** of Disbursements This Page (optional) .....

4393.25

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A.** U.S. Dept Of Health & Human Services

Mailing Address Pennsylvania Ave.

City Washington State DC Zip Code 20005-

Purpose of Disbursement  
FEE FOR SECRETARY TO ATTEND EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3962

Date of Disbursement

/   /

Amount of Each Disbursement this Period

820.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**FEE FOR SECRETARY TO ATTE-  
ND EVENT**

Full Name (Last, First, Middle Initial)

**B.** U.S. Postal Service

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
STAMPS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3833

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**STAMPS**

Full Name (Last, First, Middle Initial)

**C.** U.S. Postal Service

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60405.E3853

Date of Disbursement

/   /

Amount of Each Disbursement this Period

391.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**POSTAGE**

**SUBTOTAL** of Disbursements This Page (optional) .....

1220.56

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

**A. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
STAMPS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3896

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	0	6

Amount of Each Disbursement this Period

195.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

STAMPS

Full Name (Last, First, Middle Initial)

**B. U.S. Postal Service**

Mailing Address Chestnut Street

City New Britain State CT Zip Code 06050-

Purpose of Disbursement  
STAMPS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3933

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

Amount of Each Disbursement this Period

195.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

STAMPS

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P.O. Box 17120

City Tucson State AZ Zip Code 85731-7120

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3815

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	6

Amount of Each Disbursement this Period

160.49

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

SUBTOTAL of Disbursements This Page (optional) .....

550.49

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:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3852

Date of Disbursement

/   /

Amount of Each Disbursement this Period

302.48

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

## **B. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3889

Date of Disbursement

/   /

Amount of Each Disbursement this Period

242.91

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

Full Name (Last, First, Middle Initial)

## **C. Verizon Wireless**

Mailing Address P.O. Box 17120

City  
Tucson

State  
AZ

Zip Code  
85731-7120

Purpose of Disbursement  
PHONE SERVICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3953

Date of Disbursement

/   /

Amount of Each Disbursement this Period

241.29

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

PHONE SERVICE

**SUBTOTAL** of Disbursements This Page (optional) .....

786.68

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Johnson for Congress Committee

Full Name (Last, First, Middle Initial)

## **A. Veterans of Foreign Wars**

Mailing Address 110 Garfield Avenue

City  
New London

State  
CT

Zip Code  
06320-

Purpose of Disbursement  
ADVERTISING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3856

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

ADVERTISING

Full Name (Last, First, Middle Initial)

## **B. Darren Willcox**

Mailing Address 5202 Wehawken Road

City  
Bethesda

State  
MD

Zip Code  
20816-

Purpose of Disbursement  
ROOM RENTAL FOR 3/9/06 EVENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60317.C33200IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

IN KIND: ROOM RENTAL FOR  
3/9/06 EVENT

Full Name (Last, First, Middle Initial)

## **C. YWCA**

Mailing Address 135 Broad Street

City  
Hartford

State  
CT

Zip Code  
06105-

Purpose of Disbursement  
AD BOOK

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60405.E3886

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

AD BOOK

**SUBTOTAL** of Disbursements This Page (optional) .....

1025.00

**TOTAL** This Period (last page this line number only) .....

160812.03

**Image# 26950164862**

Form/Schedule: **F3A** Amendment submitted to report redesignation of March 2006 contribution from United Health Group, C00274431, from 2006 Primary to 2006 General - per letter dated 6/13/06 from United Health Group  
Transaction ID: **C00145607**

\*\*\*\*\*