

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

The Markey Committee

ADDRESS (number and street) P O Box 526

Check if different than previously reported. (ACC)

Medford MA 02155

2. **FEC IDENTIFICATION NUMBER** C00196774

CITY STATE ZIP CODE STATE DISTRICT

MA 07

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

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Convention (12C) Special (12S)

Election on _____ in the State of _____

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

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

Election on _____ in the State of _____

5. Covering Period 04 01 2005 through 06 30 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Marie C. Carbone

Signature of Treasurer Electronically Filed by Ms. Marie C. Carbone Date 03 03 2009

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

The Markey Committee

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

	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)).....	222954.48	232904.48
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4750.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	222954.48	228154.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	68813.40	284495.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	17255.78
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	68813.40	267240.14
8. Cash on Hand at Close of Reporting Period (from Line 27).....	2414088.36	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name
The Markey Committee

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	5

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	93954.48	105404.48
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	93954.48	105404.48
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	129000.00	127500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	222954.48	232904.48
(e) TOTAL CONTRIBUTIONS (other than loans) (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.).....	0.00	17255.78
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	8374.30	11731.44
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	231328.78	261891.70

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	68813.40	284495.92
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	4250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4750.00
21. OTHER DISBURSEMENTS.....	48430.72	88585.93
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	117244.12	377831.85

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2300003.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	231328.78
25. SUBTOTAL (add Line 23 and Line 24).....	2531332.48
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	117244.12
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2414088.36

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 102
(check only one)

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

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

NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial) Barbara H. Abramowitz		Date of Receipt MM / DD / YYYY 04 / 22 / 2005
Mailing Address 7832 16th St Nw		Transaction ID: C3400853
City Washington	State DC	Zip Code 20012-1204
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Self	Occupation Fundraising Consultant	<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 ▼ 25.00	

B.

Full Name (Last, First, Middle Initial) Andrew Athy, Jr		Date of Receipt MM / DD / YYYY 04 / 18 / 2005
Mailing Address O'Neill, Athy & Casey 1310 Nineteenth Street, NW		Transaction ID: C3303147
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer O'Neill, Athy, & Casey, PC	Occupation Attorney	<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	

C.

Full Name (Last, First, Middle Initial) Charles A Baker		Date of Receipt MM / DD / YYYY 06 / 17 / 2005
Mailing Address 179 Clinton Rd		Transaction ID: C3342008
City Brookline	State MA	Zip Code 02445-5815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Piper Rudnick	Occupation Attorney	<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)	▶	1525.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Kim K Bayliss

Mailing Address 3214 Klingle Rd NW

City Washington State DC Zip Code 20008

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

Name of Employer Dutko Worldwide Occupation Lobbyist

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 20 / 2005

Transaction ID: C3303139

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 8 Rocky Ledge Rd

City Weston State MA Zip Code 02493-1473

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

Name of Employer Belkin Co. Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 08 / 2005

Transaction ID: C3401332

Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
Matthew L. Berzok

Mailing Address 4824 Earlston Drive

City Bethesda State MD Zip Code 20816

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

Name of Employer Ryan, Phillips, Utrecht & MacKinnon Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 04 / 20 / 2005

Transaction ID: C3303142

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 3500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Edward J. Black

Mailing Address 666 11th St Nw
Sixth Floor

City Washington State DC Zip Code 20001-4500

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

Name of Employer CCIA Occupation President & CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2005

Transaction ID: C3303151

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Scott M Black

Mailing Address Delphi Management Inc
50 Rowes Wharf

City Boston State MA Zip Code 02110

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

Name of Employer Delphi Management, Inc. Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
06 / 18 / 2005

Transaction ID: C3401785

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address Wiley Rein & Fielding
1776 K St NW

City Washington State DC Zip Code 20006-2304

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

Name of Employer Wiley Rein & Fielding Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
04 / 20 / 2005

Transaction ID: C3303192

Amount of Each Receipt this Period
200.00

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

SUBTOTAL of Receipts This Page (optional) ► 2200.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 102
(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)
The Markey Committee

A.

Full Name (Last, First, Middle Initial) Thomas W Brunner		Date of Receipt MM / DD / YYYY 04 / 20 / 2005
Mailing Address 1776 K St Nw Wiley Rein & Fielding		Transaction ID: C3303193
City Washington	State DC	Zip Code 20006-2304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Wiley Rein & Fielding	Occupation Partner	<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 ▼ 200.00	

B.

Full Name (Last, First, Middle Initial) Kathryn Bucher		Date of Receipt MM / DD / YYYY 04 / 20 / 2005
Mailing Address Wiley Rein & Fielding 1776 K Street, NW		Transaction ID: C3303194
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Wiley Rein & Fielding	Occupation Partner	<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 ▼ 200.00	

C.

Full Name (Last, First, Middle Initial) Joseph F. Burke, Jr.		Date of Receipt MM / DD / YYYY 06 / 17 / 2005
Mailing Address PO Box 574 P. O. Box 574		Transaction ID: C3401346
City Wenham	State MA	Zip Code 01984-2574
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer self	Occupation consultant	<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)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 102

(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)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Edward Callahan

Mailing Address 48 Ash Hill Rd

City State Zip Code
Reading MA 01867-3831

FEC ID number of contributing federal political committee. C

Name of Employer Feeley and Driscoll Occupation CPA

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 15 / 2005

Transaction ID: C3342040

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
Charles M. Campion

Mailing Address 284 Dean Rd

City State Zip Code
Brookline MA 02445-4171

FEC ID number of contributing federal political committee. C

Name of Employer Dewey Square Group Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 20 / 2005

Transaction ID: C3342046

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Heather Campion

Mailing Address 20 State St
Fl 38

City State Zip Code
Boston MA 02109-1701

FEC ID number of contributing federal political committee. C

Name of Employer Corporate Affairs Director Occupation Citizens Financial Group

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 20 / 2005

Transaction ID: C3342026

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 10 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Bertram W Carp

Mailing Address 1155 21st St Nw
Suite 300

City Washington State DC Zip Code 20036-3308

FEC ID number of contributing federal political committee. C

Name of Employer Williams & Jensen, PLLC Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 29 / 2005

Transaction ID: C3303164

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 4 Riedesel Ave

City Cambridge State MA Zip Code 02138-2212

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Retired

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 15 / 2005

Transaction ID: C3401335

Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
Gerald S. Cassidy

Mailing Address 1209 Stuart Robeson Dr

City Mc Lean State VA Zip Code 22101-2900

FEC ID number of contributing federal political committee. C

Name of Employer Cassidy & Associates, Inc. Occupation Chairman

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 21 / 2005

Transaction ID: C3393085

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

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

Mailing Address PO Box 446

City State Zip Code
New Vernon NJ 07976-0446

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

Name of Employer Occupation
The Connell Company Executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 13 / 2005

Transaction ID: C3401344

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Jonathan W. Cuneo

Mailing Address Cuneo Gilbert & Laduca LLP
507 C Street, NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation
Cuneo Gilbert & Laduca LLP Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 22 / 2005

Transaction ID: C3401338

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Laura A. Debonis

Mailing Address 12 Marlborough Street

City State Zip Code
Boston MA 02116

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

Name of Employer Occupation
Google Executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 05 / 2005

Transaction ID: C3341998

Amount of Each Receipt this Period
2100.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 102
	<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)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Eric Desilva	Date of Receipt MM / DD / YYYY 04 / 20 / 2005
	Mailing Address Wiley Rein & Fielding 1776 K Street, NW	Transaction ID: C3303195
	City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Wiley Rein & Fielding Partner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) Paul Egerman	Date of Receipt MM / DD / YYYY 06 / 20 / 2005
	Mailing Address 77 Westcliff Rd	Transaction ID: C3342032
	City State Zip Code Weston MA 02493-1409	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Escription CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Mary Jane England	Date of Receipt MM / DD / YYYY 05 / 27 / 2005
	Mailing Address 235 Wellesley St	Transaction ID: C3400874
	City State Zip Code Weston MA 02493	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Regis College President	
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)	2700.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 13 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
James P. Fabiani
 Mailing Address 1101 Pennsylvania Ave Nw
 City Washington State DC Zip Code 20004-2514
 Date of Receipt 04 / 12 / 2005
 Transaction ID: C3303155
 Amount of Each Receipt this Period 2100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Fabiani & Company Occupation President
 Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas M. Feeley
 Mailing Address 19 Buttonwood Dr
 City Andover State MA Zip Code 01810-5880
 Date of Receipt 06 / 20 / 2005
 Transaction ID: C3342041
 Amount of Each Receipt this Period 2100.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Feeley & Driscoll, P.C. Occupation Managing Partner
 Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas M. Feeley
 Mailing Address 19 Buttonwood Dr
 City Andover State MA Zip Code 01810-5880
 Date of Receipt 06 / 20 / 2005
 Transaction ID: C3342042
 Amount of Each Receipt this Period 900.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Feeley & Driscoll, P.C. Occupation Managing Partner
 Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
David H. Fine

Mailing Address 109 Lexington Rd.

City Lincoln State MA Zip Code 01773

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

Name of Employer Cytterra Corporation Occupation President & CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 09 / 2005

Transaction ID: C3401336

Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
Lawrence K Fish

Mailing Address 171 Heath St

City Chestnut Hill State MA Zip Code 02467-2806

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

Name of Employer Citizens Financial Occupation President

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 17 / 2005

Transaction ID: C3342028

Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Charles F Flaherty

Mailing Address 25 Homer Ave Apt 34

City Cambridge State MA Zip Code 02138-4560

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

Name of Employer Capitol Consulting Group Occupation Consultant

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 20 / 2005

Transaction ID: C3342050

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 102
(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)
The Markey Committee

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

Mailing Address Wiley Rein & Fielding LLP
1776 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Wiley Rein & Fielding, LLP Occupation Partner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 20 / 2005
Transaction ID: C3303196
 Amount of Each Receipt this Period: 200.00

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

B. Full Name (Last, First, Middle Initial)
Richard L. Friedman

Mailing Address Carpenter And Company
20 University Road

City Cambridge State MA Zip Code 02138

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

Name of Employer Carpenter and Company Occupation President & CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 21 / 2005
Transaction ID: C3342016
 Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Deborah A. Gendron

Mailing Address 84 Longley Rd.

City Shirley State MA Zip Code 02464

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

Name of Employer U.S.Postal Service Occupation Rural Carrier

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 20 / 2005
Transaction ID: C3302733
 Amount of Each Receipt this Period: 35.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 102
(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)
The Markey Committee

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

Mailing Address 125 Cameron Mews

City State Zip Code
Alexandria VA 22314-2603

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

Name of Employer Occupation
Cuneo Gilbert & LaDuca LLP Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: C3401337

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 87 church street

City State Zip Code
weston MA 02493

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

Name of Employer Occupation
Hellman Jordan investment adviser

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 5

Transaction ID: C3334442

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 4442 Hawthorne St Nw

City State Zip Code
Washington DC 20016-3589

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

Name of Employer Occupation
Motion Picture Association of America President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: C3400817

Amount of Each Receipt this Period
1000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 17 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Thomas P. Glynn, III

Mailing Address 12 Candleberry Lane

City Belmont State MA Zip Code 02478

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

Name of Employer Partners Healthcare Occupation Administrator

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 06 / 11 / 2005
Transaction ID: C3400888
 Amount of Each Receipt this Period 2000.00

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

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

Mailing Address 30 Huntington Rd

City Newton State MA Zip Code 02458-2417

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

Name of Employer Mass Envelope Plus Occupation Executive

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 20 / 2005
Transaction ID: C3401345
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Terrence J Guiney

Mailing Address 22 Carruth St

City Dorchester State MA Zip Code 02124-4922

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

Name of Employer self Occupation hotel owner

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 06 / 30 / 2005
Transaction ID: C3401784
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Claudia M. James
Mailing Address 3167 19th St N
City Arlington State VA Zip Code 22201-5103
FEC ID number of contributing federal political committee. **C**
Name of Employer Podesta-Mattoon Occupation Partner
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 05 / 31 / 2005
Transaction ID: C3341992
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kevin M. Joseph
Mailing Address 2358 N Oakland St
City Arlington State VA Zip Code 22207-5142
FEC ID number of contributing federal political committee. **C**
Name of Employer The Joseph Group, LLC Occupation Attorney
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 04 / 20 / 2005
Transaction ID: C3303145
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Barbara Kates-Garnick
Mailing Address 140 Dudley St
City Brookline State MA Zip Code 02445-5908
FEC ID number of contributing federal political committee. **C**
Name of Employer KeySpan Energy Occupation Vice President
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 06 / 30 / 2005
Transaction ID: C3401787
Amount of Each Receipt this Period 300.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Dennis J Kearney

Mailing Address 7 Madison Ave W

City Winchester State MA Zip Code 01890-3002

FEC ID number of contributing federal political committee. C

Name of Employer: Kearney Donovan and McGee Occupation: Attorney at Law

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 20 / 2005
Transaction ID: C3342004

Amount of Each Receipt this Period: 2000.00

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

B. Full Name (Last, First, Middle Initial)
Julia Ruth Koehler

Mailing Address 3 Greenough Pk. Apt. 1

City Jamaica Plain State MA Zip Code 02130

FEC ID number of contributing federal political committee. C

Name of Employer: Information Requested Occupation: Information Requested

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 80.00

Date of Receipt: 04 / 15 / 2005
Transaction ID: C3342053

Amount of Each Receipt this Period: 80.00

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

C. Full Name (Last, First, Middle Initial)
Mary E. LaCamera

Mailing Address 214 Beacon St

City Boston State MA Zip Code 02116-1307

FEC ID number of contributing federal political committee. C

Name of Employer: Director of Marketing Occupation: Greater Boston Convention

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 14 / 2005
Transaction ID: C3400890

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) 3080.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Donald F Law

Mailing Address 7 Wilsondale St.

City State Zip Code
Dover MA 02030

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

Name of Employer Occupation
Live Nation, Inc Concert Promoter

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 31 / 2005

Transaction ID: C3400879

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 5729 Potomac Ave Nw

City State Zip Code
Washington DC 20016-2559

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

Name of Employer Occupation
N/A at home

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
05 / 02 / 2005

Transaction ID: C3303223

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Anna Lombardo Ancitil

Mailing Address 1 Monument St

City State Zip Code
Medford MA 02155

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

Name of Employer Occupation
none none

Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 21 / 2005

Transaction ID: C3302748

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional) ► **2050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 102

(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)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Mark M. MacCarthy

Mailing Address 1300 Connecticut Ave Nw
Ste 900

City State Zip Code
Washington DC 20036-1703

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

Name of Employer Occupation
Visa USA Senior Vice President-Public Policy

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 2 / 2 0 0 5

Transaction ID: C3303162

Amount of Each Receipt this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)
Douglas J. McGregor

Mailing Address PO Box 636

City State Zip Code
Rowley MA 01969-3636

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

Name of Employer Occupation
Feeley & Driscoll, P.C. Partner

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 6 / 1 4 / 2 0 0 5

Transaction ID: C3342039

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Leon M Metzger

Mailing Address 2 American Ln

City State Zip Code
Greenwich CT 06831-2551

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

Name of Employer Occupation
Paloma Partners Management Co. Sr. Vice President

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 164.48

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 9 / 2 0 0 5

Transaction ID: C3401789

Amount of Each Receipt this Period

164.48

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

* In-Kind: Lunch Costs

SUBTOTAL of Receipts This Page (optional)

1664.48

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 102
(check only one)

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

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

NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Stephen V Miller

Mailing Address 23 Kingsbury St

City State Zip Code
Needham MA 02492-3105

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

Name of Employer Occupation
McDermott Quilty Miller attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 20 / 2005

Transaction ID: C3342038

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
richard G mintz

Mailing Address 63 Atlantic Avenue

City State Zip Code
Boston MA 02110

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

Name of Employer Occupation
Mintz, Levin, Cohn, Ferris, etc. attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
04 / 20 / 2005

Transaction ID: C3302719

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Michael E. Mone

Mailing Address Esdaile Barrett & Esdaile
75 Federal Street

City State Zip Code
Boston MA 02110

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

Name of Employer Occupation
Esdaile, Barrett, & Esdaile Attorney

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
06 / 29 / 2005

Transaction ID: C3401339

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 102
(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)
The Markey Committee

A.

Full Name (Last, First, Middle Initial) Scott Nathan		Date of Receipt MM / DD / YYYY 06 / 20 / 2005
Mailing Address 10 Saint James Ave Ste. 1700		Transaction ID: C3342000
City Boston	State MA	Zip Code 02116-3813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer The Baupost Group	Occupation Managing Partner	<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 ▼ 2100.00	

B.

Full Name (Last, First, Middle Initial) Daniel O'Connell		Date of Receipt MM / DD / YYYY 06 / 20 / 2005
Mailing Address PO Box 315		Transaction ID: C3342047
City Watervl Vly	State NH	Zip Code 03215-0315
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Spaulding & Slye	Occupation VP	<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	

C.

Full Name (Last, First, Middle Initial) Todd G Patkin		Date of Receipt MM / DD / YYYY 06 / 11 / 2005
Mailing Address 11 Mary Way		Transaction ID: C3401334
City Foxboro	State MA	Zip Code 02035-2777
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Autoparts International	Occupation President	<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	

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

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

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

FOR LINE NUMBER: PAGE 24 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Bruce Perelay
Mailing Address 276 Newbury St
City Boston State MA Zip Code 02116-2426
FEC ID number of contributing federal political committee. **C**
Name of Employer Mt. Vernon Co. Occupation CEO
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt 06 / 03 / 2005
Transaction ID: C3401348
Amount of Each Receipt this Period 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Stephen G. Perry
Mailing Address 4087 Ridgeview Cir
City Mc Lean State VA Zip Code 22101-5809
FEC ID number of contributing federal political committee. **C**
Name of Employer Dutko Worldwide Occupation Vice Chairman
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 01 / 2005
Transaction ID: C3341989
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Kevin C Phelan
Mailing Address 93 Lowell Rd
City Wellesley Hls State MA Zip Code 02481-2716
FEC ID number of contributing federal political committee. **C**
Name of Employer Colliers Meredith & Grew Occupation Executive Vice President
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 11 / 2005
Transaction ID: C3400886
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 102
(check only one)

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

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

NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
R. Robert Popeo

Mailing Address 1200 Webster St

City Needham State MA Zip Code 02492-3223

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

Name of Employer Mintz Levin Occupation Attorney

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 20 / 2005
Transaction ID: C3342051
Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Stanley J. Portman

Mailing Address 260 Carnation Circle

City Reading State MA Zip Code 01867

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

Name of Employer Business Owner Occupation Action Ambulance

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 27 / 2005
Transaction ID: C3334188
Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
P. Terry Ragon

Mailing Address One Memorial Drive

City Cambridge State MA Zip Code 02142

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

Name of Employer Intersystems Occupation CEO and Founder

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt: 06 / 20 / 2005
Transaction ID: C3342002
Amount of Each Receipt this Period: 2100.00

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

SUBTOTAL of Receipts This Page (optional) ► **4100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 102
(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)
The Markey Committee

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

Mailing Address One Memorial Drive

City State Zip Code
Cambridge MA 02142

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

Name of Employer Intersystems Occupation Executive

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 6 / 2 0 / 2 0 0 5

Transaction ID: C3401343

Amount of Each Receipt this Period
2100.00

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

B. Full Name (Last, First, Middle Initial)
Richard H Rendon

Mailing Address 44 Bromfield Street, 8th Floor

City State Zip Code
Boston MA 02108

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

Name of Employer The Rendon Group 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
 0 6 / 2 0 / 2 0 0 5

Transaction ID: C3342043

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Thomas M Ryan

Mailing Address 4323 Westover PI NW

City State Zip Code
Washington DC 20016-5553

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

Name of Employer Ryan, MacKinnon, Vasapoli and Berzok, 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 Y
 0 4 / 2 0 / 2 0 0 5

Transaction ID: C3303141

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **4100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Richard P. Salinsky		Date of Receipt MM / DD / YYYY 06 / 10 / 2005
	Mailing Address One Salem Street		Transaction ID: C3340281
	City Salem	State MA	Zip Code 01970
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Best Petroleum Co.	Occupation Executive	<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.	Full Name (Last, First, Middle Initial) Lin C. Sasman		Date of Receipt MM / DD / YYYY 04 / 26 / 2005
	Mailing Address 27 Starr Ln		Transaction ID: C3400808
	City Jamaica Plain	State MA	Zip Code 02130
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Information Requested	Occupation Information Requested	<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 ▼ 100.00		

C.	Full Name (Last, First, Middle Initial) James W Segel		Date of Receipt MM / DD / YYYY 06 / 20 / 2005
	Mailing Address Smith Segel And Sowalsky 50 Congress Street		Transaction ID: C3342013
	City Boston	State MA	Zip Code 02109
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Smith Segel & Sowalsky	Occupation Attorney	<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)	▶	2100.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

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

Mailing Address 120 W 45th St
39th Floor

City State Zip Code
New York NY 10036-4041

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

Name of Employer D.E. Shaw & Compant, Inc. Occupation Biomedical Research

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4200.00

Date of Receipt

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

Transaction ID: C3332449

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 120 W 45th St
39th Floor

City State Zip Code
New York NY 10036-4041

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

Name of Employer D.E. Shaw & Compant, Inc. Occupation Biomedical Research

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4200.00

Date of Receipt

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

Transaction ID: C3332450

Amount of Each Receipt this Period
2100.00

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

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

Mailing Address 1330 Connecticut Ave Nw
Ste 300

City State Zip Code
Washington DC 20036-1704

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

Name of Employer Recording Industry Association of Amer Occupation President & CEO

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	5	/	0	2	/	2	0	0	5

Transaction ID: C3303224

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5200.00**

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

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

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

FOR LINE NUMBER: PAGE 29 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

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

Mailing Address 209 Falcon Ridge Road

City State Zip Code
Great Falls VA 22066

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

Name of Employer Occupation
Brownstein Hyatt Farber & Schreck Policy Director

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: C3303159

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Alfred A Slifka

Mailing Address PO Box 9161
800 South Street

City State Zip Code
Waltham MA 02454-9161

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

Name of Employer Occupation
Global Company executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 5

Transaction ID: C3400884

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Alfred A Slifka

Mailing Address PO Box 9161
800 South Street

City State Zip Code
Waltham MA 02454-9161

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

Name of Employer Occupation
Global Company executive

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
0 6 / 0 1 / 2 0 0 5

Transaction ID: C3400885

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4500.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
James E Smith
 Mailing Address 50 Congress Street, Suite 500
 City State Zip Code
 Boston MA 02109
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 0 / 2 0 0 5
Transaction ID: C3342049
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Smith, Ruddock & Hayes Attorney at Law
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Alan D Solomont
 Mailing Address 220 Ridgeway Rd
 City State Zip Code
 Weston MA 02493-2707
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 2 4 / 2 0 0 5
Transaction ID: C3342631
 Amount of Each Receipt this Period
 2000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SB Ventures Investor
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John W. Spillane
 Mailing Address 11 Dennison Rd
 City State Zip Code
 Worcester MA 01609-1221
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 6 / 0 9 / 2 0 0 5
Transaction ID: C3400882
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Spillane & Spillane Attorney
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 102
(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)
The Markey Committee

A.

Full Name (Last, First, Middle Initial) Barbara Sutton		Date of Receipt MM / DD / YYYY 06 / 07 / 2005
Mailing Address 700 13th St Nw STE 400		Transaction ID: C3341991
City Washington	State DC	Zip Code 20005-3960
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Cassidy & Associates, Inc.	Occupation Senior Vice President	<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.

Full Name (Last, First, Middle Initial) Howard J Symons		Date of Receipt MM / DD / YYYY 06 / 09 / 2005
Mailing Address 4809 Newport Ave		Transaction ID: C3341996
City Bethesda	State MD	Zip Code 20816-2926
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Mintz Levin Cohn Ferris et al	Occupation partner	<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	

C.

Full Name (Last, First, Middle Initial) Mathew Trant		Date of Receipt MM / DD / YYYY 04 / 20 / 2005
Mailing Address 818 Connecticut Ave., NW Suite 1100		Transaction ID: C3303156
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer The National Group	Occupation Partner	<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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
A. Raymond Tye
Mailing Address 175 Campanelli Drive
City Braintree State MA Zip Code 02184
FEC ID number of contributing federal political committee. **C**
Name of Employer United Liquors Occupation executive
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 16 / 2005
Transaction ID: C3342035
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Eileen Tye
Mailing Address 175 Campanelli Dr
City Braintree State MA Zip Code 02184-5206
FEC ID number of contributing federal political committee. **C**
Name of Employer N/A Occupation Homemaker
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 16 / 2005
Transaction ID: C3342036
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Arthur D Ullian
Mailing Address 76 Hyde Ave
City Newton State MA Zip Code 02458-2334
FEC ID number of contributing federal political committee. **C**
Name of Employer The Boston Land Company Occupation Executive
Receipt For: 2006 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 06 / 20 / 2005
Transaction ID: C3342006
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 102
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 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)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Elaine Ullian	Date of Receipt MM / DD / YYYY 06 / 13 / 2005
	Mailing Address Boston Medical Ctr Talbot Building	Transaction ID: C3401333
	City Boston State MA Zip Code 02118	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Boston Medical Center Occupation President, CEO	
	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00		

B.	Full Name (Last, First, Middle Initial) Vincent M Versage	Date of Receipt MM / DD / YYYY 04 / 18 / 2005
	Mailing Address 211 Duke Street	Transaction ID: C3303197
	City Alexandria State VA Zip Code 22314	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer The National Group Occupation Partner	
	Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 500.00		

C.	Full Name (Last, First, Middle Initial) Philip L Verveer	Date of Receipt MM / DD / YYYY 04 / 20 / 2005
	Mailing Address 2125 Leroy PI NW	Transaction ID: C3302716
	City Washington State DC Zip Code 20008-1848	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Wilkie, Farr & Gallagher Occupation Partner	
	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)	3000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Gerard J. Waldron	Date of Receipt MM / DD / YYYY 04 / 13 / 2005
	Mailing Address 323 Springvale Road	Transaction ID: C3303153
	City State Zip Code Great Falls VA 22066	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Covington & Burling Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Patrick H. Williams	Date of Receipt MM / DD / YYYY 06 / 23 / 2005
	Mailing Address 4213 Everett Street	Transaction ID: C3401327
	City State Zip Code Kensington MD 20895	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation The Cormac Group Principal	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) James L. Winston	Date of Receipt MM / DD / YYYY 04 / 20 / 2005
	Mailing Address 11408 Symphony Woods Ln	Transaction ID: C3303152
	City State Zip Code Silver Spring MD 20901-5030	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation NABOB Executive Director	
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)	2500.00
TOTAL This Period (last page this line number only)	93954.48

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
AFLAC Incorporated Political Action Committee

Mailing Address Worldwide Headquarters

City Columbus State GA Zip Code 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 04 / 19 / 2005
Transaction ID: C3303143
 Amount of Each Receipt this Period: 2000.00

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

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

Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 06 / 03 / 2005
Transaction ID: C3400892
 Amount of Each Receipt this Period: 5000.00

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

C. Full Name (Last, First, Middle Initial)
Air Line Pilots' Association PAC

Mailing Address 1625 Massachusetts Ave. NW
8th Floor

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035451

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 02 / 2005
Transaction ID: C3400806
 Amount of Each Receipt this Period: 2500.00

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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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 102
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITT

Mailing Address 14600 Trinity Blvd
Suite 500

City State Zip Code
Fort Worth TX 76155

FEC ID number of contributing federal political committee. **C** C00267849

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 5 / 0 3 / 2 0 0 5

Transaction ID: C3332216

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
American Ambulance Association Federal Pac (aka Am

Mailing Address 8201 Greensboro Drive
Suite 300

City State Zip Code
McLean VA 22102

FEC ID number of contributing federal political committee. **C** C00168070

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 6 / 1 3 / 2 0 0 5

Transaction ID: C3342052

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
American Postal Workers Union

Mailing Address 1300 L. Street NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00162891

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 4 / 0 5 / 2 0 0 5

Transaction ID: C3400843

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► **8500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION
 Mailing Address 1400 K Street NW
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C** C00373696
 Name of Employer Occupation
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 5 / 2 0 0 5
Transaction ID: C3303165
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
American Public Power Association POWER PAC
 Mailing Address 2301 M Street, NW
 Suite 300
 City State Zip Code
 Washington DC 20037
 FEC ID number of contributing federal political committee. **C** C00161570
 Name of Employer Occupation
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 1 9 / 2 0 0 5
Transaction ID: C3303144
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AMERICAN WIND ENERGY ASSOCIATION POLITICAL ACTION
 Mailing Address 122 C STREET NW 4TH FLOOR
 City State Zip Code
 WASHINGTON DC 20001
 FEC ID number of contributing federal political committee. **C** C00259572
 Name of Employer Occupation
 Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 0 / 2 0 0 5
Transaction ID: C3400801
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 38 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
ASCAP LEGISLATIVE FUND FOR THE ARTS
Mailing Address ONE LINCOLN PLAZA
City State Zip Code
New York NY 10023
FEC ID number of contributing federal political committee. **C** C00228296
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 4 / 2 2 / 2 0 0 5
Transaction ID: C3400838
Amount of Each Receipt this Period
1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
ASSOCIATION OF TRIAL LAWYERS OF AMERICA POLITICAL
Mailing Address 1050 31st Street N.W.
City State Zip Code
Washington DC 20007
FEC ID number of contributing federal political committee. **C** C00024521
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 4 / 2 0 / 2 0 0 5
Transaction ID: C3303161
Amount of Each Receipt this Period
5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
AT&T PAC
Mailing Address 1120 20th Street NW
Suite 1000
City State Zip Code
Washington DC 20036
FEC ID number of contributing federal political committee. **C** C00185124
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 4 / 2 0 / 2 0 0 5
Transaction ID: C3400803
Amount of Each Receipt this Period
5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 11000.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 39 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Bank Of America Corporation Federal Political Acti

Mailing Address 100 Tryone Street

City State Zip Code
Charlotte NC 28255

FEC ID number of contributing federal political committee. **C** C00364778

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 6 / 2 9 / 2 0 0 5

Transaction ID: C3400780

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
CELLULAR TELECOMMUNICATIONS & INTERNET ASSOC PAC F

Mailing Address 1400 16th Street, N.W.
Suite 600

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00262295

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 6 / 2 9 / 2 0 0 5

Transaction ID: C3400798

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
CINGULAR WIRELESS LLC EMPLOYEE PAC

Mailing Address 5565 GLENRIDGE CONNECTOR
SUITE 1700

City State Zip Code
ATLANTA GA 30342

FEC ID number of contributing federal political committee. **C** C00368811

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 4 / 2 0 / 2 0 0 5

Transaction ID: C3400852

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **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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Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
CITIZENS FINANCIAL GROUP INC POLITICAL COMMITTEE

Mailing Address ONE CITIZENS PLAZA

City State Zip Code
Providence RI 02903

FEC ID number of contributing federal political committee. **C** C00307249

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 6 / 1 6 / 2 0 0 5

Transaction ID: C3342023

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
CLEAR CHANNEL COMMUNICATIONS INC POLITICAL ACTION

Mailing Address 200 E. Basse Road

City State Zip Code
San Antonio TX 78209

FEC ID number of contributing federal political committee. **C** C00279216

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 6 / 1 7 / 2 0 0 5

Transaction ID: C3401330

Amount of Each Receipt this Period
3000.00

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

C. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City State Zip Code
Philadelphia PA 19102

FEC ID number of contributing federal political committee. **C** C00248716

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 4 / 2 8 / 2 0 0 5

Transaction ID: C3331978

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **7500.00**

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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt 06 / 30 / 2005
Transaction ID: C3400774
 Amount of Each Receipt this Period 2500.00

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

B. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt 06 / 30 / 2005
Transaction ID: C3400776
 Amount of Each Receipt this Period 2500.00

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

C. Full Name (Last, First, Middle Initial)
CWA-cope Political Contributions Committee

Mailing Address 501 Third Street NW

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 06 / 14 / 2005
Transaction ID: C3401347
 Amount of Each Receipt this Period 2500.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **7500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Democrat Republican Independent Voter Education
 Mailing Address 25 Louisiana Avenue, N.w.
 City State Zip Code
 Washington DC 20001
 FEC ID number of contributing federal political committee. **C** C00032979
 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 5 / 1 6 / 2 0 0 5
Transaction ID: C3401341
 Amount of Each Receipt this Period
 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
General Electric Company Political Action Committee
 Mailing Address 1299 Pennsylvania Ave Nw
 Ste 1100
 City State Zip Code
 Washington DC 20004
 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 ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 0 4 / 2 0 / 2 0 0 5
Transaction ID: C3400855
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Human Rights Campaign
 Mailing Address 1640 Rhode Island Avenue NW
 City State Zip Code
 Washington DC 20036
 FEC ID number of contributing federal political committee. **C** C00235853
 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 4 / 1 4 / 2 0 0 5
Transaction ID: C3303154
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 102
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
International Association of Fire Fighters

Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00029447

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt MM / DD / YYYY
06 / 10 / 2005

Transaction ID: C3341987

Amount of Each Receipt this Period 2000.00

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

B. Full Name (Last, First, Middle Initial)
International Council of Cruise Lines PAC

Mailing Address 1211 Connecticut Ave. NW
Suite 800

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00303073

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
04 / 08 / 2005

Transaction ID: C3393084

Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Keeping America's Promise, Inc.

Mailing Address 607 14th Street, NW
Suite 800

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00409508

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
06 / 23 / 2005

Transaction ID: C3401788

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITT

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 23 / 2005
Transaction ID: C3401342
Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
MCI Employees PAC

Mailing Address 1133 19th Street, N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00142836

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 04 / 19 / 2005
Transaction ID: C3303158
Amount of Each Receipt this Period: 2500.00

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

C. Full Name (Last, First, Middle Initial)
Nat'l Telecommunications Cooperative Assn./Telecom

Mailing Address 4121 Wilson Blvd.
10th Floor

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00004473

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt: 04 / 07 / 2005
Transaction ID: C3331980
Amount of Each Receipt this Period: 1500.00

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

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for each category of the
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(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS PAC

Mailing Address 1771 N STREET NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 04 / 11 / 2005
Transaction ID: C3303146
Amount of Each Receipt this Period: 5000.00

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

B. Full Name (Last, First, Middle Initial)
National Association Of Home Builders

Mailing Address 15th & M Streets NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C70002712

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 31 / 2005
Transaction ID: C3401340
Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
National Cable And Telecommunications Association

Mailing Address 25 Massachusetts Avenue, NW #100

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010082

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 04 / 15 / 2005
Transaction ID: C3303160
Amount of Each Receipt this Period: 5000.00

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

SUBTOTAL of Receipts This Page (optional) ► **11000.00**

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

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

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

FOR LINE NUMBER: PAGE 46 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
National Electrical Contractors Association PAC

Mailing Address 3 Bethesda Metro Center
Suite 1100

City State Zip Code
Bethesda MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

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 4 / 2 0 / 2 0 0 5

Transaction ID: C3400849

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
National Emergency Medicine Pac Of The American Co

Mailing Address 1125 Executive Circle

City State Zip Code
Irving TX 75038

FEC ID number of contributing federal political committee. **C** C00140061

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 6 / 0 2 / 2 0 0 5

Transaction ID: C3342034

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
NEWS AMERICA HOLDINGS INC-FOX POL ACTION COMMITTEE

Mailing Address 444 N CAPITOL STREET - SUITE 740

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00330019

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 6 / 1 5 / 2 0 0 5

Transaction ID: C3342029

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **8000.00**

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

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

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

FOR LINE NUMBER: PAGE 47 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
NEWS AMERICA HOLDINGS INC-FOX POL ACTION COMMITTEE
 Mailing Address 444 N CAPITOL STREET - SUITE 740
 City Washington State DC Zip Code 20001
 Date of Receipt 06 / 29 / 2005
 Transaction ID: C3400796
 Amount of Each Receipt this Period 5000.00
 FEC ID number of contributing federal political committee. **C** C00330019
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Onebeacon Political Action Committee (federal)
 Mailing Address One Beacon Street
 City Boston State MA Zip Code 02108
 Date of Receipt 06 / 13 / 2005
 Transaction ID: C3342044
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C** C00205393
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Paul, Hastings, Janofsky & Walker PAC
 Mailing Address 515 South Flower St.
25th Floor
 City Los Angeles State CA Zip Code 90071
 Date of Receipt 04 / 20 / 2005
 Transaction ID: C3400869
 Amount of Each Receipt this Period 2500.00
 FEC ID number of contributing federal political committee. **C** C00144584
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 8500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 48 / 102
(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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Physical Therapy Political Action Committee
Mailing Address 1111 North Fairfax Street
City Alexandria State VA Zip Code 22314
FEC ID number of contributing federal political committee. **C** C00012880
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt 05 / 02 / 2005
Transaction ID: C3400835
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
PIPER RUDNICK LLP PAC
Mailing Address 1200 Nineteenth Street, N.W.
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00151340
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 04 / 20 / 2005
Transaction ID: C3303157
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE
Mailing Address 141 Spring Street
City Lexington State MA Zip Code 02421
FEC ID number of contributing federal political committee. **C** C00097568
Name of Employer Occupation
Receipt For: 2006
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt 04 / 21 / 2005
Transaction ID: C3400832
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **8500.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 102
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 141 Spring Street

City State Zip Code
Lexington MA 02421

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
06 / 14 / 2005

Transaction ID: C3401331

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Realtors Political Action Committee

Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
05 / 03 / 2005

Transaction ID: C3400878

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
SES AMERICOM PAC INC

Mailing Address FOUR RESEARCH WAY

City State Zip Code
PRINCETON NJ 08540

FEC ID number of contributing federal political committee. **C** C00375592

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
04 / 26 / 2005

Transaction ID: C3331979

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

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

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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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Siemens Corporation Political Action Committee

Mailing Address 701 Pennsylvania Avenue Nw
Suite 720

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00353797

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 04 / 2005
Transaction ID: C3400840
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Sonnenschein Nath & Rosenthal Llp Political Action

Mailing Address 1301 K Street Nw
Suite 600 East Tower

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00216127

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 18 / 2005
Transaction ID: C3303140
 Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
SOUTHWEST AIRLINES PILOTS' ASSOCIATION POLITICAL A

Mailing Address 1450 EMPIRE CENTRAL DR SUITE 737

City DALLAS State TX Zip Code 75247

FEC ID number of contributing federal political committee. **C** C00360669

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 04 / 21 / 2005
Transaction ID: C3341986
 Amount of Each Receipt this Period: 2000.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 51 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
SPRINT CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 6450 SPRINT PARKWAY

City OVERLAND PARK State KS Zip Code 66251

FEC ID number of contributing federal political committee. **C** C00089342

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 04 / 20 / 2005
Transaction ID: C3332215
 Amount of Each Receipt this Period: 2000.00

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

B. Full Name (Last, First, Middle Initial)
T-MOBILE POLITICAL ACTION COMMITTEE

Mailing Address 401 9th STREET NW SUITE 550

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00361758

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 04 / 26 / 2005
Transaction ID: C3303163
 Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 1650 Arch Street-22nd Floor

City Philadelphia State PA Zip Code 19103

FEC ID number of contributing federal political committee. **C** C00162719

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 09 / 2005
Transaction ID: C3342020
 Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
THELEN REID & PRIEST POLITICAL ACTION COMMITTEE

Mailing Address 701 PENNSYLVANIA AVENUE NW STE 800

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00248641

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
04 / 26 / 2005

Transaction ID: C3331977

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
TIME WARNER POLITICAL ACTION CMTE

Mailing Address 800 Connecticut Ave. NW Suite 200

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00339291

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
06 / 08 / 2005

Transaction ID: C3341995

Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
Time Warner Telecom Inc. Political Action Committee

Mailing Address 10475 Park Meadows Drive

City Littleton State CO Zip Code 80124

FEC ID number of contributing federal political committee. **C** C00355941

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: MM / DD / YYYY
05 / 13 / 2005

Transaction ID: C3401329

Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

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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)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
Transportation Trades Department Afl-cio Political
Mailing Address 888 16th St Nw Suite 650

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00280909

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 04 / 20 / 2005
Transaction ID: C3303150
 Amount of Each Receipt this Period: 500.00

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

B. Full Name (Last, First, Middle Initial)
Treasury Employees PAC
Mailing Address 1750 H. St. NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 10 / 2005
Transaction ID: C3400812
 Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
United Brotherhood Of Carpenters/joiners Of Amer N
Mailing Address P O Box 562

City Norwalk State CT Zip Code 06852

FEC ID number of contributing federal political committee. **C** C00150045

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 05 / 2005
Transaction ID: C3400823
 Amount of Each Receipt this Period: 2500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 102
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial)
United Food & Commercial Workers, Active Ballot Cl
Mailing Address 1775 K Street, N.W.
City Washington State DC Zip Code 20006
FEC ID number of contributing federal political committee. **C** C00002766
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00
Date of Receipt 04 / 08 / 2005
Transaction ID: C3400847
Amount of Each Receipt this Period 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
VEN-PAC
Mailing Address PO BOX 70002
City WASHINGTON State DC Zip Code 20024
FEC ID number of contributing federal political committee. **C** C00369660
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 04 / 20 / 2005
Transaction ID: C3303149
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPL
Mailing Address 1150 17TH STREET NW SUITE 400
City WASHINGTON State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C** C00197749
Name of Employer Occupation
Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00
Date of Receipt 04 / 20 / 2005
Transaction ID: C3303148
Amount of Each Receipt this Period 5000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 8000.00
TOTAL This Period (last page this line number only) ► 129000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 102
(check only one)

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

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address P.O.Box 2969

City State Zip Code
Omaha NE 68103-2969

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
559.37

Date of Receipt
MM / DD / YYYY
06 / 03 / 2005

Transaction ID: C3401359

Amount of Each Receipt this Period
559.37

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

B.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
987.90

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: C3401357

Amount of Each Receipt this Period
641.00

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

C.

Full Name (Last, First, Middle Initial)
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol St. SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00347864

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
987.90

Date of Receipt
MM / DD / YYYY
06 / 30 / 2005

Transaction ID: C3401356

Amount of Each Receipt this Period
346.90

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

SUBTOTAL of Receipts This Page (optional) ► **1547.27**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 102
	<input 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 checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) SEI Investments Company		Date of Receipt
	Mailing Address One Freedom Valley Drive		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Oaks	PA	19456
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C3401899
Receipt For: 2006		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="508.99"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="655.29"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

B.	Full Name (Last, First, Middle Initial) SEI Investments Company		Date of Receipt
	Mailing Address One Freedom Valley Drive		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Oaks	PA	19456
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C3401900
Receipt For: 2006		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="45.02"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="655.29"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

C.	Full Name (Last, First, Middle Initial) SEI Investments Company		Date of Receipt
	Mailing Address One Freedom Valley Drive		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2005"/>
	City	State	Zip Code
	Oaks	PA	19456
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	Transaction ID: C3401901
Receipt For: 2006		Amount of Each Receipt this Period	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	Election Cycle-to-Date ▼	<input type="text" value="15.31"/>	
<input type="checkbox"/> Other (specify) ▼	<input type="text" value="655.29"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="569.32"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 57 / 102

(check only one)

<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
U.S. Treasury

Mailing Address 1500 Pennsylvania Avenue NW

City State Zip Code
Washington DC 20220

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2288.60

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 3 0 / 2 0 0 5

Transaction ID: C3401897

Amount of Each Receipt this Period

2007.60

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

B.

Full Name (Last, First, Middle Initial)
U.S. Treasury

Mailing Address Internal Revenue Service

City State Zip Code
Ogden UT 84201

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4250.11

Date of Receipt

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

Transaction ID: C3401358

Amount of Each Receipt this Period

4250.11

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

SUBTOTAL of Receipts This Page (optional)

6257.71

TOTAL This Period (last page this line number only)

8374.30

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) ADP Tax/Financial</p> <p>Mailing Address 8094 Sandpiper Circle</p> <p>City Nottingham State MD Zip Code 21236</p> <p>Purpose of Disbursement withholding taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100033</p> <p>Date of Disbursement 04 / 26 / 2005</p> <p>Amount of Each Disbursement this Period 4132.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) ADP Tax/Financial</p> <p>Mailing Address 8094 Sandpiper Circle</p> <p>City Nottingham State MD Zip Code 21236</p> <p>Purpose of Disbursement payroll services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100034</p> <p>Date of Disbursement 04 / 26 / 2005</p> <p>Amount of Each Disbursement this Period 72.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) ADP Tax/Financial</p> <p>Mailing Address 8094 Sandpiper Circle</p> <p>City Nottingham State MD Zip Code 21236</p> <p>Purpose of Disbursement withholding taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100035</p> <p>Date of Disbursement 05 / 27 / 2005</p> <p>Amount of Each Disbursement this Period 4133.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

8338.91

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

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

Mailing Address 8094 Sandpiper Circle

City Nottingham State MD Zip Code 21236

Purpose of Disbursement withholding taxes
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100117
Date of Disbursement
04 / 01 / 2005

Amount of Each Disbursement this Period
4155.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
ADP Tax/Financial

Mailing Address 8094 Sandpiper Circle

City Nottingham State MD Zip Code 21236

Purpose of Disbursement payroll services
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100118
Date of Disbursement
04 / 01 / 2005

Amount of Each Disbursement this Period
81.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
ADP Tax/Financial

Mailing Address 8094 Sandpiper Circle

City Nottingham State MD Zip Code 21236

Purpose of Disbursement payroll services
Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100314
Date of Disbursement
06 / 15 / 2005

Amount of Each Disbursement this Period
6.35

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

4243.25

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) ADP Tax/Financial	Transaction ID: D100315 Date of Disbursement 06 / 30 / 2005
	Mailing Address 8094 Sandpiper Circle	Amount of Each Disbursement this Period 4133.32
	City Nottingham State MD Zip Code 21236	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement withholding taxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D100025 Date of Disbursement 04 / 22 / 2005
	Mailing Address P.O.Box 2969	Amount of Each Disbursement this Period 443.06
	City Omaha State NE Zip Code 68103-2969	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: D100026 Date of Disbursement 06 / 10 / 2005
	Mailing Address P.O.Box 2969	Amount of Each Disbursement this Period 298.27
	City Omaha State NE Zip Code 68103-2969	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	4874.65
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Bank Of America TTL Payment

Transaction ID: D100114

Date of Disbursement

Mailing Address 39 Pleasant Street

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	5

City Malden State MA Zip Code 02148

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
tax on interest accrued

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Bank Of America

Transaction ID: D100113

Date of Disbursement

Mailing Address 39 Pleasant Street

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

City Malden State MA Zip Code 02148

Amount of Each Disbursement this Period

0.50

Purpose of Disbursement
service fee

001

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Bank Of America

Transaction ID: D100202

Date of Disbursement

Mailing Address 39 Pleasant Street

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	0	5

City Malden State MA Zip Code 02148

Amount of Each Disbursement this Period

1.50

Purpose of Disbursement
service fee

--

Category/
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2002.00

TOTAL This Period (last page this line number only)

--

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Bank Of America	Transaction ID: D100203 Date of Disbursement 06 / 24 / 2005
	Mailing Address 39 Pleasant Street	Amount of Each Disbursement this Period 5.00
	City Malden State MA Zip Code 02148	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement service fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Blue Cross Blue Shield Of Mass.	Transaction ID: D100268 Date of Disbursement 05 / 27 / 2005
	Mailing Address PO Box 4700	Amount of Each Disbursement this Period 707.17
	City Woburn State MA Zip Code 01888	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement health care Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Boston Private Bank And Trust Company	Transaction ID: D100316 Date of Disbursement 04 / 30 / 2005
	Mailing Address Ten Post Office Square	Amount of Each Disbursement this Period 67.23
	City Boston State MA Zip Code 02109	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement investment fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	779.40
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Boston Private Bank And Trust Company	Transaction ID: D100317 Date of Disbursement
	Mailing Address Ten Post Office Square	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>
	City Boston State MA Zip Code 02109	Amount of Each Disbursement this Period
	Purpose of Disbursement investment fee	<input type="text" value="241.80"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Boston Private Bank And Trust Company	Transaction ID: D100318 Date of Disbursement
	Mailing Address Ten Post Office Square	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2005"/>
	City Boston State MA Zip Code 02109	Amount of Each Disbursement this Period
	Purpose of Disbursement investment fee	<input type="text" value="211.70"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) CareFirst Blue Choice	Transaction ID: D100045 Date of Disbursement
	Mailing Address 550 12th Street S.W.	<input type="text" value="06"/> / <input type="text" value="22"/> / <input type="text" value="2005"/>
	City Washington State DC Zip Code 20065	Amount of Each Disbursement this Period
	Purpose of Disbursement health care premium	<input type="text" value="561.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/Type <input type="text" value="001"/>
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1014.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Charlie Palmer Steakhouse	Transaction ID: D100067 Date of Disbursement 06 / 09 / 2005
	Mailing Address 101 Constitution Ave, NW	Amount of Each Disbursement this Period 1036.10
	City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement catering Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Charlotte Catholic High School	Transaction ID: D100066 Date of Disbursement 05 / 01 / 2005
	Mailing Address 7702 Pineville Matthews	Amount of Each Disbursement this Period 250.00
	City Charlotte State NC Zip Code 28226	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement donation Candidate Name	012 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Cingular Wireless	Transaction ID: D100040 Date of Disbursement 05 / 04 / 2005
	Mailing Address 5565 Glenridge Connector	Amount of Each Disbursement this Period 133.48
	City Atlanta State GA Zip Code 30342	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement communications service Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1419.58
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts</p> <p>Mailing Address One Ashburton Place Department of Revenue</p> <p>City Boston State MA Zip Code 02108</p> <p>Purpose of Disbursement investment Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D165516 Date of Disbursement 05 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 333.38</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Daily Times Chronicle</p> <p>Mailing Address 1 Arrow Drive</p> <p>City Woburn State MA Zip Code 01801</p> <p>Purpose of Disbursement advertisement Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100023 Date of Disbursement 04 / 15 / 2005</p> <p>Amount of Each Disbursement this Period 350.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address 209 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement office rent and communication service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100027 Date of Disbursement 04 / 28 / 2005</p> <p>Amount of Each Disbursement this Period 1481.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2164.64

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address 209 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement office rent and communication services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100028</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1346.09"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Dan Williams</p> <p>Mailing Address 209 Pennsylvania Ave., SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement office rent and communication services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100029</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="210.89"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David L. Andrukitis Inc</p> <p>Mailing Address 50 E Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100070</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="230.01"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1786.99"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Derrico McGlynn</p> <p>Mailing Address 76 High Street</p> <p>City Medford State MA Zip Code 02155</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100022</p> <p>Date of Disbursement 04 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 156.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Independent Newspaper Group</p> <p>Mailing Address 385 Broadway P. O. Box 380</p> <p>City Revere State MA Zip Code 02151</p> <p>Purpose of Disbursement advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100024</p> <p>Date of Disbursement 04 / 15 / 2005</p> <p>Amount of Each Disbursement this Period 50.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Mark C. Gallagher</p> <p>Mailing Address 137 Peterborough St, Apt 34</p> <p>City Boston State MA Zip Code 02215</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100012</p> <p>Date of Disbursement 04 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 70.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

276.50

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mark C. Gallagher</p> <p>Mailing Address 137 Peterborough St, Apt 34</p> <p>City Boston State MA Zip Code 02215</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100013</p> <p>Date of Disbursement 04 / 26 / 2005</p> <p>Amount of Each Disbursement this Period 5887.97</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mark C. Gallagher</p> <p>Mailing Address 137 Peterborough St, Apt 34</p> <p>City Boston State MA Zip Code 02215</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100014</p> <p>Date of Disbursement 05 / 07 / 2005</p> <p>Amount of Each Disbursement this Period 69.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mark C. Gallagher</p> <p>Mailing Address 137 Peterborough St, Apt 34</p> <p>City Boston State MA Zip Code 02215</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100015</p> <p>Date of Disbursement 05 / 27 / 2005</p> <p>Amount of Each Disbursement this Period 5883.33</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

11840.55

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

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

Transaction ID: D100115
Date of Disbursement

Mailing Address 137 Peterborough St, Apt 34

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	0	5

City State Zip Code
Boston MA 02215

Amount of Each Disbursement this Period

5917.12

Purpose of Disbursement
salary

001

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Massachusetts Department of Revenue

Transaction ID: D100071
Date of Disbursement

Mailing Address P O Box 7018

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	0	5

City State Zip Code
Boston MA 02204

Amount of Each Disbursement this Period

18.19

Purpose of Disbursement
taxes

001

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Mr. Leon M Metzger

Transaction ID: D100273
Date of Disbursement

Mailing Address 2 American Ln

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	0	5

City State Zip Code
Greenwich CT 06831-2551

Amount of Each Disbursement this Period

164.48

Purpose of Disbursement
Lunch Costs

--

Candidate Name

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought: House Senate President
Disbursement For: 2006 Primary General Other (specify) ▼

State: District:

* In-Kind Received

SUBTOTAL of Disbursements This Page (optional)

6099.79

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Morgan Gray</p> <p>Mailing Address 2727 29th Street, NW Apartment 338</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100116</p> <p>Date of Disbursement 04 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 2093.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Morgan Gray</p> <p>Mailing Address 2727 29th Street, NW Apartment 338</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100016</p> <p>Date of Disbursement 04 / 05 / 2005</p> <p>Amount of Each Disbursement this Period 243.76</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Morgan Gray</p> <p>Mailing Address 2727 29th Street, NW Apartment 338</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100017</p> <p>Date of Disbursement 04 / 26 / 2005</p> <p>Amount of Each Disbursement this Period 2093.97</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	4431.69
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Morgan Gray Mailing Address 2727 29th Street, NW Apartment 338 City Washington State DC Zip Code 20008 Purpose of Disbursement salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100018 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 5	Amount of Each Disbursement this Period 2093.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) NGP Software, Inc. Mailing Address 1225 Eye Street, N.W. Suite 1225 City Washington State DC Zip Code 20005 Purpose of Disbursement campaign software rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100041 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 0 / 2 0 0 5	Amount of Each Disbursement this Period 1950.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Our Lady Of The Presentation School Mailing Address 634 Washington Street City Brighton State MA Zip Code 02135 Purpose of Disbursement donation Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100065 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 5	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)		5043.96	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Protege Commercial Properties</p> <p>Mailing Address 6 Held Circle</p> <p>City Medford State MA Zip Code 02155</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100019</p> <p>Date of Disbursement 04 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Protege Commercial Properties</p> <p>Mailing Address 6 Held Circle</p> <p>City Medford State MA Zip Code 02155</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100020</p> <p>Date of Disbursement 05 / 02 / 2005</p> <p>Amount of Each Disbursement this Period 700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Protege Commercial Properties</p> <p>Mailing Address 6 Held Circle</p> <p>City Medford State MA Zip Code 02155</p> <p>Purpose of Disbursement rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100021</p> <p>Date of Disbursement 06 / 01 / 2005</p> <p>Amount of Each Disbursement this Period 700.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

2100.00

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100030 Date of Disbursement 05 / 11 / 2005
	Mailing Address P. O. Box 6600	Amount of Each Disbursement this Period 31.20
	City Hagerstown State MD Zip Code 21741	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement on-line transaction fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

B.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100031 Date of Disbursement 05 / 11 / 2005
	Mailing Address P. O. Box 6600	Amount of Each Disbursement this Period 14.20
	City Hagerstown State MD Zip Code 21741	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement on-line transaction fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

C.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100032 Date of Disbursement 05 / 11 / 2005
	Mailing Address P. O. Box 6600	Amount of Each Disbursement this Period 0.50
	City Hagerstown State MD Zip Code 21741	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement on-line transaction fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		003 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	45.90
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100042 Date of Disbursement
	Mailing Address P. O. Box 6600	<input type="text" value="04"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement on-line transaction fee	<input type="text" value="45.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100199 Date of Disbursement
	Mailing Address P. O. Box 6600	<input type="text" value="06"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement on-line transaction fee	<input type="text" value="25.15"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Sun Trust Merchant Services	Transaction ID: D100200 Date of Disbursement
	Mailing Address P. O. Box 6600	<input type="text" value="06"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="05"/>
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period
	Purpose of Disbursement on-line transaction fee	<input type="text" value="19.95"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="90.10"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) The Massachusetts Immigrant and Refugee Adovacy Co</p> <p>Mailing Address 105 Chauncy Street, Suite 901</p> <p>City Boston State MA Zip Code 02111</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100069</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 75.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Trover Shop</p> <p>Mailing Address 221 Pennsylvania Avenue, S.E.</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100068</p> <p>Date of Disbursement 04 / 13 / 2005</p> <p>Amount of Each Disbursement this Period 311.96</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100036</p> <p>Date of Disbursement 04 / 29 / 2005</p> <p>Amount of Each Disbursement this Period 228.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

615.95

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100037 Date of Disbursement 05 / 04 / 2005</p> <p>Amount of Each Disbursement this Period 267.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100038 Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 191.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone service Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100039 Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 111.69</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

571.25

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D100043 Date of Disbursement 05 / 10 / 2005
	Mailing Address P. O. Box 1	Amount of Each Disbursement this Period 2377.85
	City Worcester State MA Zip Code 01654	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: D100044 Date of Disbursement 06 / 10 / 2005
	Mailing Address P. O. Box 1	Amount of Each Disbursement this Period 210.42
	City Worcester State MA Zip Code 01654	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement telephone service Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D100119 Date of Disbursement 04 / 06 / 2005
	Mailing Address P. O. Box 2855	Amount of Each Disbursement this Period 2643.16
	City New York State NY Zip Code 10116	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement credit card payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	5231.43
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 2855 City New York State NY Zip Code 10116 Purpose of Disbursement membership renewal fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100125 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
	Amount of Each Disbursement this Period 150.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Federal Express Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement delivery services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100122 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
	Amount of Each Disbursement this Period 18.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Federal Express Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement delivery services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100123 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 5
	Amount of Each Disbursement this Period 22.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D100120 Date of Disbursement 04 / 06 / 2005
	Mailing Address 1025 Wayne Avenue	Amount of Each Disbursement this Period 26.69
	City Chambersburg State PA Zip Code 17201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D100121 Date of Disbursement 04 / 06 / 2005
	Mailing Address 1025 Wayne Avenue	Amount of Each Disbursement this Period 7.31
	City Chambersburg State PA Zip Code 17201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement office supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) The Garage At 100 Clarendon	Transaction ID: D100158 Date of Disbursement 04 / 06 / 2005
	Mailing Address 100 Clarendon Street	Amount of Each Disbursement this Period 9.00
	City Boston State MA Zip Code 02116	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement parking Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial) Uniserve On-Line	Mailing Address		Unit 1-3180 262nd Street	
	City	State	Zip Code	
	Blaine	WA	98231	
	Purpose of Disbursement on-line services		<input type="text" value="001"/> Category/ Type	
	Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

Transaction ID: D100124
Date of Disbursement:
Amount of Each Disbursement this Period:
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) USPS	Mailing Address		Mountain Ave	
	City	State	Zip Code	
	Malden	MA	02148	
	Purpose of Disbursement mailing expense		<input type="text" value="003"/> Category/ Type	
	Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

Transaction ID: D100127
Date of Disbursement:
Amount of Each Disbursement this Period:
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Verizon Wireless	Mailing Address		1012 East Bidwell Street	
	City	State	Zip Code	
	Folsom	CA	95630	
	Purpose of Disbursement telephone service		<input type="text" value="001"/> Category/ Type	
	Candidate Name			
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:			

Transaction ID: D100126
Date of Disbursement:
Amount of Each Disbursement this Period:
 Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P. O. Box 2855</p> <p>City New York State NY Zip Code 10116</p> <p>Purpose of Disbursement credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100128</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 3543.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Bestsellers Cafe</p> <p>Mailing Address 24 High Street</p> <p>City Medford State MA Zip Code 02155</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100145</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 3.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Bistro Bis</p> <p>Mailing Address 15 E Street, N.W.</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100137</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 1772.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3543.12

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) CATO Travel</p> <p>Mailing Address 1st & C St NE # B24</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement travel service fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100129</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Courtyard Marriot</p> <p>Mailing Address 30 Industrial Avenue East</p> <p>City Lowell State MA Zip Code 01852</p> <p>Purpose of Disbursement travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100146</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 108.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Enterprise Rent A Car</p> <p>Mailing Address</p> <p>City Bethesda State MD Zip Code</p> <p>Purpose of Disbursement car rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100140</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 167.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial) ExxonMobil Mailing Address 320 Main Street City Medford State MA Zip Code 02155 Purpose of Disbursement travel expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100151 Date of Disbursement 06 / 10 / 2005 Amount of Each Disbursement this Period 36.97 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/Type 002	

B. Full Name (Last, First, Middle Initial) Federal Express Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement delivery services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100133 Date of Disbursement 06 / 10 / 2005 Amount of Each Disbursement this Period 19.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/Type 001	

C. Full Name (Last, First, Middle Initial) Federal Express Mailing Address P. O. Box 1140 City Memphis State TN Zip Code 38101 Purpose of Disbursement delivery services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100134 Date of Disbursement 06 / 10 / 2005 Amount of Each Disbursement this Period 19.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Category/Type 001	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D100135 Date of Disbursement 06 / 10 / 2005
	Mailing Address P. O. Box 1140	Amount of Each Disbursement this Period 18.01
	City Memphis State TN Zip Code 38101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement delivery services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Federal Express	Transaction ID: D100136 Date of Disbursement 06 / 10 / 2005
	Mailing Address P. O. Box 1140	Amount of Each Disbursement this Period 18.01
	City Memphis State TN Zip Code 38101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement delivery services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends Parking	Transaction ID: D100156 Date of Disbursement 06 / 10 / 2005
	Mailing Address	Amount of Each Disbursement this Period 7.00
	City Boston State MA Zip Code	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement parking Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Jewish National Fund</p> <p>Mailing Address 42 E. 69th Street</p> <p>City Manhattan State NY Zip Code 10021</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100131</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 72.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Norwood Gulf</p> <p>Mailing Address 707 Neponset Street</p> <p>City Norwood State MA Zip Code 02062</p> <p>Purpose of Disbursement travel expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100154</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 27.85</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Orbitz</p> <p>Mailing Address 200 South Wacker Drive Suite 1900</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement travel fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100147</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 6.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Pilgram Parking</p> <p>Mailing Address 99 Summer Street</p> <p>City Boston State MA Zip Code 02115</p> <p>Purpose of Disbursement parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100152</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 25.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Plaza Athenee</p> <p>Mailing Address 37 East 64th Street</p> <p>City Manhattan State NY Zip Code 10021</p> <p>Purpose of Disbursement travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100130</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 582.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Symantec</p> <p>Mailing Address 20330 Stevens Creek Blvd</p> <p>City Cupertino State CA Zip Code 95014</p> <p>Purpose of Disbursement software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100149</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 39.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) The Parking Co.</p> <p>Mailing Address 55 Dorrance Street, 5th Floor</p> <p>City Providence State RI Zip Code 02903</p> <p>Purpose of Disbursement parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100139</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 15.25</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) U. S. Airways</p> <p>Mailing Address 2345 Crystal Drive Reagan National Airport</p> <p>City Arlington State VA Zip Code 22227</p> <p>Purpose of Disbursement airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100141</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 338.91</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) U. S. Airways</p> <p>Mailing Address 2345 Crystal Drive Reagan National Airport</p> <p>City Arlington State VA Zip Code 22227</p> <p>Purpose of Disbursement travel service fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100142</p> <p>Date of Disbursement 06 / 10 / 2005</p> <p>Amount of Each Disbursement this Period 19.90</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
U. S. Airways

Mailing Address 2345 Crystal Drive
Reagan National Airport

City Arlington State VA Zip Code 22227

Purpose of Disbursement
travel service fee

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100132
Date of Disbursement

06 / 10 / 2005

Amount of Each Disbursement this Period

5.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Uniserve On-Line

Mailing Address Unit 1-3180 262nd Street

City Blaine State WA Zip Code 98231

Purpose of Disbursement
on-line services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100138
Date of Disbursement

06 / 10 / 2005

Amount of Each Disbursement this Period

18.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address 1012 East Bidwell Street

City Folsom State CA Zip Code 95630

Purpose of Disbursement
telephone service

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100144
Date of Disbursement

06 / 10 / 2005

Amount of Each Disbursement this Period

197.79

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: D100182 Date of Disbursement
	Mailing Address P. O. Box 2855	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
	City New York State NY Zip Code 10116	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment	<input type="text" value="2299.24"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) American News Womens Club	Transaction ID: D100259 Date of Disbursement
	Mailing Address 16-7 22nd Street, NW	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
	City Washington State DC Zip Code 20008	Amount of Each Disbursement this Period
	Purpose of Disbursement donation	<input type="text" value="200.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		012 Category/Type

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Anderson Florist	Transaction ID: D100235 Date of Disbursement
	Mailing Address 226 Moody Street	<input type="text" value="05"/> / <input type="text" value="19"/> / <input type="text" value="2005"/>
	City Waltham State MA Zip Code 02453	Amount of Each Disbursement this Period
	Purpose of Disbursement flowers	<input type="text" value="133.00"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		012 Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2299.24"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Comcast

Mailing Address Box 6506

City Chelmsford State MA Zip Code 01824

Purpose of Disbursement
communications services

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100226
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

16.72

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Exxon/Mobil

Mailing Address

City Waltham State MA Zip Code 02453

Purpose of Disbursement
travel expense

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100232
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

44.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Exxon/Mobil

Mailing Address

City Waltham State MA Zip Code 02453

Purpose of Disbursement
travel expense

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D100233
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

36.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address P. O. Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
delivery services

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100224
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

41.87

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address P. O. Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
delivery services

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100225
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

17.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Fishers Flower Shop

Mailing Address 3720 Monroe Street

City Dearborn State MI Zip Code 48124

Purpose of Disbursement
flowers

Candidate Name

012
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: D100230
Date of Disbursement

05 / 19 / 2005

Amount of Each Disbursement this Period

107.95

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Jewish National Fund</p> <p>Mailing Address 42 E. 69th Street</p> <p>City Manhattan State NY Zip Code 10021</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100231</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 72.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Jewish National Fund</p> <p>Mailing Address 42 E. 69th Street</p> <p>City Manhattan State NY Zip Code 10021</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100221</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 36.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Newbury Street Parking</p> <p>Mailing Address Newbury St</p> <p>City Boston State MA Zip Code 02116-3047</p> <p>Purpose of Disbursement travel expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100238</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 30.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Parcel 7 Garage Mailing Address City Boston State MA Zip Code Purpose of Disbursement travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100258 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 16.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Radio Shack Mailing Address 95 Summer St City Boston State MA Zip Code 02110-1204 Purpose of Disbursement telephone equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100236 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 238.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P. O. Box 36647 City Dallas State TX Zip Code 75235 Purpose of Disbursement airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D100228 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 194.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Southwest Airlines Mailing Address P. O. Box 36647 City Dallas State TX Zip Code 75235 Purpose of Disbursement airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100229 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 188.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 1025 Wayne Avenue City Chambersburg State PA Zip Code 17201 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100223 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 79.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Sunoco Station Mailing Address 375 Main Street City Waltham State MA Zip Code 02452 Purpose of Disbursement travel expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D100234 Date of Disbursement 05 / 19 / 2005 Amount of Each Disbursement this Period 30.02 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Uniserve On-Line</p> <p>Mailing Address Unit 1-3180 262nd Street</p> <p>City Blaine State WA Zip Code 98231</p> <p>Purpose of Disbursement on-line services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100227</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 18.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100237</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 63.58</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address 1012 East Bidwell Street</p> <p>City Folsom State CA Zip Code 95630</p> <p>Purpose of Disbursement telephone service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D100257</p> <p>Date of Disbursement 05 / 19 / 2005</p> <p>Amount of Each Disbursement this Period 674.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	68813.40

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) City of Everett</p> <p>Mailing Address 484 Broadway</p> <p>City Everett State MA Zip Code 02149</p> <p>Purpose of Disbursement investment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D165520</p> <p>Date of Disbursement 05 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 71.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) City of Everett</p> <p>Mailing Address 484 Broadway</p> <p>City Everett State MA Zip Code 02149</p> <p>Purpose of Disbursement investment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D165521</p> <p>Date of Disbursement 06 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 69.20</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) City of Everett</p> <p>Mailing Address 484 Broadway</p> <p>City Everett State MA Zip Code 02149</p> <p>Purpose of Disbursement investment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D165511</p> <p>Date of Disbursement 04 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 2662.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2803.21

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) City Of Medford	Transaction ID: D165512 Date of Disbursement 04 / 30 / 2005
	Mailing Address 85 George P. Hassett Drive	Amount of Each Disbursement this Period 291.66
	City Medford State MA Zip Code 02155	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement investment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) City Of Medford	Transaction ID: D165517 Date of Disbursement 05 / 31 / 2005
	Mailing Address 85 George P. Hassett Drive	Amount of Each Disbursement this Period 244.26
	City Medford State MA Zip Code 02155	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement investment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) City Of Medford	Transaction ID: D165526 Date of Disbursement 06 / 30 / 2005
	Mailing Address 85 George P. Hassett Drive	Amount of Each Disbursement this Period 236.38
	City Medford State MA Zip Code 02155	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement investment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	772.30
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) City of Revere Mailing Address 281 Broadway City Revere State MA Zip Code 02151 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165528 Date of Disbursement 06 / 30 / 2005 Amount of Each Disbursement this Period 77.41 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) City of Revere Mailing Address 281 Broadway City Revere State MA Zip Code 02151 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165519 Date of Disbursement 05 / 31 / 2005 Amount of Each Disbursement this Period 80.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) City of Revere Mailing Address 281 Broadway City Revere State MA Zip Code 02151 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165513 Date of Disbursement 04 / 30 / 2005 Amount of Each Disbursement this Period 2825.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	2982.41
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D165515 Date of Disbursement 05 / 31 / 2005 Amount of Each Disbursement this Period 27.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D165510 Date of Disbursement 04 / 30 / 2005 Amount of Each Disbursement this Period 2700.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D165522 Date of Disbursement 06 / 30 / 2005 Amount of Each Disbursement this Period 26.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2753.71

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 100 / 102

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165523 Date of Disbursement 06 / 30 / 2005 Amount of Each Disbursement this Period 0.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165524 Date of Disbursement 06 / 30 / 2005 Amount of Each Disbursement this Period 1125.27 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Commonwealth Of Massachusetts Mailing Address One Ashburton Place Department of Revenue City Boston State MA Zip Code 02108 Purpose of Disbursement investment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165525 Date of Disbursement 06 / 30 / 2005 Amount of Each Disbursement this Period 322.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1448.76

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 South Capitol St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement donation of excess campaign funds</p> <p>Candidate Name DCCC</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100046</p> <p>Date of Disbursement 06 / 30 / 2005</p> <p>Amount of Each Disbursement this Period 35000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Massachusetts Democratic Party</p> <p>Mailing Address 56 Roland Street North Lobby #203</p> <p>City Charlestown State MA Zip Code 02129</p> <p>Purpose of Disbursement political contribution</p> <p>Candidate Name MASSACHUSETTS DEMOCRATIC PARTY</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D100047</p> <p>Date of Disbursement 04 / 20 / 2005</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Town of Natick</p> <p>Mailing Address 13 East Central St.</p> <p>City Natick State MA Zip Code 01760</p> <p>Purpose of Disbursement investment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D165518</p> <p>Date of Disbursement 05 / 31 / 2005</p> <p>Amount of Each Disbursement this Period 85.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

37585.16

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 102

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
The Markey Committee

A. Full Name (Last, First, Middle Initial) Town of Natick <hr/> Mailing Address 13 East Central St. <hr/> City Natick State MA Zip Code 01760 <hr/> Purpose of Disbursement investment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165559 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 5
	Amount of Each Disbursement this Period 2.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Town of Natick <hr/> Mailing Address 13 East Central St. <hr/> City Natick State MA Zip Code 01760 <hr/> Purpose of Disbursement investment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D165527 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 5
	Amount of Each Disbursement this Period 82.42 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

85.17

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

48430.72