

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2000 DEC 10 A 10:41

1. NAME OF COMMITTEE (In full)
Simmons for Congress

ADDRESS (number and street) ☐ Check if different than previously reported.
12 Roosevelt Ave. Box 4

CITY, STATE and ZIP CODE STATE/DISTRICT
Mystic, CT 06355 ST 02

2. FEC IDENTIFICATION NUMBER
C00343821

3. IS THIS REPORT AN AMENDMENT?
☐ YES ☒ NO

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ July 15 Quarterly Report
- ☐ October 15 Quarterly Report ☒ 30-Day Post-Election Report following the General Election
- ☐ January 31 Year End Report on 11/07/2000 in the State of CT
- ☐ July 31 Mid-Year Report (Non-election Year Only) ☐ Termination Report

This Report Contains Activity For ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10/19/2000</u> through <u>11/27/2000</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	\$190,776.64	\$693,680.73
(b) Total Contribution Refunds (from Line 20(d))	\$1,210.00	\$1,500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	\$189,566.64	\$692,180.73
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	\$429,767.83	\$970,929.93
(b) Total Offsets to Operating Expenditures (from Line 14)	\$0.00	\$1,688.50
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	\$429,767.83	\$969,241.43
8. Cash on Hand at Close of Reporting Period (from Line 27)	\$35,204.71	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
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)	\$202,000.00	

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 **Anne Simeone**

Signature of Treasurer  Date **12/06/2000**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. Section 5437g.

--	--	--	--	--	--	--	--	--

FEC FORM 3
(revised 4/97)

DETAILED SUMMARY PAGE

of Receipts and Disbursements

(Page 2, FEC FORM 3)

Name of Committee (In full) Simmons for Congress		C00343921	Report Covering the Period: From: 10/19/2000 To: 11/27/2000
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A)		\$49,928.00	11(a)(i)
(ii) Unitemized		\$19,730.00	11(a)(ii)
(iii) Total of Contributions from Individuals		\$69,658.00	11(a)(iii)
(b) Political Party Committees		\$2,850.00	11(b)
(c) Other Political Committees (such as PACs)		\$114,938.92	11(c)
(d) The Candidate		\$3,329.72	11(d)
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c), and (d))		\$190,776.64	11(e)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		\$0.00	12
13. LOANS:			
(a) Made or Guaranteed by the Candidate		\$0.00	13(a)
(b) All Other Loans		\$150,000.00	13(b)
(c) TOTAL LOANS (add 13(a) and (b))		\$150,000.00	13(c)
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)		\$0.00	14
15. OTHER RECEIPTS (Dividends, Interest, etc.)		\$313.40	15
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14, and 15)		\$341,090.04	16
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES		\$429,767.83	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		\$0.00	18
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate		\$0.00	19(a)
(b) Of All Other Loans		\$0.00	19(b)
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))		\$0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees		\$1,100.00	20(a)
(b) Political Party Committees		\$10.00	20(b)
(c) Other Political Committees (such as PACs)		\$100.00	20(c)
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b), and (c))		\$1,210.00	20(d)
21. OTHER DISBURSEMENTS		\$0.00	21
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d), and 21)		\$430,977.83	22
III. CASH SUMMARY			
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$125,092.50	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$341,090.04	24
25. SUBTOTAL (add Line 23 and Line 24)		\$466,182.54	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		\$430,977.83	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		\$35,204.71	27

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 18

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Ackley, Robert W. 599 Taugwonk Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Davis Standard Occupation President Aggregate Year-to-Date > \$600.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Anderson, James 143 Paquet Avenue Mystic CT 06355 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Bartholet, Anne 88 Tipping Rock Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$450.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Bartnik, Peter 134 Anchorage Circle Groton CT 06340 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Beno, George 627 Quinebaug Rd. Quinebaug CT 06262 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Beno Associates Occupation Owner Aggregate Year-to-Date > \$450.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$450.00
F. Full Name, Mailing Address and ZIP Code Berdick, Edward 764 Voluntown Road Jewett City CT 06351 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Drake Asset Occupation Executive Aggregate Year-to-Date > \$256.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Bernhard, George K, Jr. 52 Palmer Neck Road Pawcatuck CT 06379 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$325.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$2,425.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343821

A. Full Name, Mailing Address and ZIP Code Bingham, Anne 50 White Birch Road Salem CT 06420 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Housewife Aggregate Year-to-Date > \$785.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$400.00
B. Full Name, Mailing Address and ZIP Code Bingham, Anne Carr 42 Round Hill Road Salem CT 06420 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Housewife Aggregate Year-to-Date > \$370.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$35.00
C. Full Name, Mailing Address and ZIP Code Brown, Allyn 60 N.W. Corner Rd. Preston CT 06365 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Maple Lane Farms Occupation Farming Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Brustolon, Everest 18 Elderkin Ave. Groton CT 06340 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Bunin, Steven 748 Long Hill Rd. Groton CT 06340 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Optics Unlimited Occupation Optometrist Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and ZIP Code Burke, Elizabeth P.O. Box 145 Dayville CT 06241 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$300.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Chadwick, Rodney 109 Golfview Dr. Cohutta GA 30710 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Chadwick & Associates Occupation Information Systems Aggregate Year-to-Date > \$900.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$900.00

SUBTOTAL of Receipts This Page (optional)

\$2,435.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Chuang, Frank 38 Stonegate Dr. Wethersfield CT 06109 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer L-C Associates, Inc. Occupation Doctor Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Connors, John 28 Starr Rd. Colchester CT 06415 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Aetna Inc. Occupation Manager Aggregate Year-to-Date > \$400.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and ZIP Code Corbett, Rita 417 N Angulla Rd. Pawcatuck CT 06379 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Housewife Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Cullen, Fergus 1245 Farmington Ave. Suite 228 W Hartford CT 06107 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Grassroots East Occupation President Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Darrell, Marjorie 10 Longwood Dr. Apt. 208 Westwood MA 02090 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Davies, Judith 332 Joshuatown Road Old Lyme CT 06371 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Housewife Aggregate Year-to-Date > \$400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$75.00
G. Full Name, Mailing Address and ZIP Code Davis, Franklin 302 Montauk Ave. Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer H.F. Supply Co., Inc. Occupation Merchant Aggregate Year-to-Date > \$450.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$350.00

SUBTOTAL of Receipts This Page (optional)

\$2,375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 19

FOR LINE NUMBER
11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Delmhorst, Arthur 45 Dawn Harbor Lane Riverside CT 06878 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Real Estate Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Des Rosiers, Edwin P. 39 Falls Road P.O. Box 23 Moodus CT 06489 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Dixon, Barbara S. 590 N Main Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Financial Analyst Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Dubey, Paul 32 Meadow Woods Road Essex CT 06426 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer PBD Enterprises Occupation Investments Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Duffy, James 8 Running Brook Lane New Canaan CT 06840 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Memberworks, Inc. Occupation CEO Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Enfield, David 40 Quana duck Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Eppinger, Frank N 125 Main Street North Stonington CT 06358 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$306.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$2,400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 5 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Falana, H Frank, Jr. 3980 South Street Coventry CT 06238 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Date (month, day, year) 10/24/2000 Amount of Each Receipt this Period \$100.00 Occupation Retired Aggregate Year-to-Date > \$524.00
B. Full Name, Mailing Address and ZIP Code Faddersen, Ingrid 31 Front Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Date (month, day, year) 10/24/2000 Amount of Each Receipt this Period \$619.00 Occupation Photographer Aggregate Year-to-Date > \$1,000.00
C. Full Name, Mailing Address and ZIP Code Fuharty, John 229 10th St. NE Washington DC 20002 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Date (month, day, year) 11/17/2000 Amount of Each Receipt this Period \$1,000.00 Occupation Retired Aggregate Year-to-Date > \$1,000.00
D. Full Name, Mailing Address and ZIP Code Forbes, Steve 1335 Burnt Mills Rd. Bedminster NJ 07921 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Date (month, day, year) 11/04/2000 Amount of Each Receipt this Period \$1,000.00 Occupation Retired Aggregate Year-to-Date > \$1,000.00
E. Full Name, Mailing Address and ZIP Code Fowler, Emily 50 Pound Ridge Road Bedford NY 10506 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Date (month, day, year) 10/24/2000 Amount of Each Receipt this Period \$1,000.00 Occupation Retired Aggregate Year-to-Date > \$2,000.00
F. Full Name, Mailing Address and ZIP Code Frank, Joanna 300 Riverside Dr. Apt 2F New York NY 10025 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Date (month, day, year) 11/01/2000 Amount of Each Receipt this Period \$250.00 Occupation Retired Aggregate Year-to-Date > \$750.00
G. Full Name, Mailing Address and ZIP Code Frank, Stanley 481 Waterville Rd. Farmington CT 06032 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Gem Jewelry Date (month, day, year) 10/27/2000 Amount of Each Receipt this Period \$50.00 Occupation Owner Aggregate Year-to-Date > \$350.00

SUBTOTAL of Receipts This Page (optional)

\$4,019.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 19

FOR LINE NUMBER
11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Frank, Stanley 481 Waterville Rd. Farmington CT 06032 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Gem Jewelry Occupation Owner Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and ZIP Code Frank, Stanley 481 Waterville Rd. Farmington CT 06032 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Gem Jewelry Occupation Owner Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Fusscas, James 1604 SW St. Andrews Drive Palm City FL 34990 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer State of CT Occupation State Representative Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Gallup, Elisha L. 81 Hyde Pond Court Mystic CT 06355 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer The Winthrop Group Occupation Engineer Aggregate Year-to-Date > \$260.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and ZIP Code Galluzzo, Donna 224-R Skeet Club Rd. Durham CT 06422 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer CT VNA Occupation President Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Gamble, Richard F. P.O. Box 862 Essex CT 06426 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$700.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code Gesick, Marcia 341 Main St. Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Amtech Occupation President Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$2,950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Gibbons, Lile 23 Tomac Avenue Old Greenwich CT 06870 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Odin Partners Occupation Commentary Volunteer Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Gildersleeve, Richard O. 57 Flanders Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Olson Mobeck & Assoc. Occupation Investment Advisor Aggregate Year-to-Date > \$350.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Ginsberg, Jay 7 Applewood Common East Lyme CT 06333 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Southeastern CT Nephrology Occupation Physician Aggregate Year-to-Date > \$475.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code Gray, Robert 751 Lake Ave. Greenwich CT 06831 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Axiom International Occupation Trader Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Guevremont, John P.O. Box 791 Great Falls VA 22066 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Nashantucket Pequot Nation Occupation Government Relations Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/17/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Guyol, John T 264 Taugwonk Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$400.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and ZIP Code Haders, Richard PO Box 244 Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$2,700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Halsey, Alexandra 27 East Forest Road Mystic CT 06355 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Halsey, Anthony 27 E Forest Road Mystic CT 06355 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$600.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Hanley, Lea 250 Jungla Rd. Palm Beach FL 33480 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Lexington Management Group Occupation Manager Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Harrington, Susan 7 Nauyaug North Mystic CT 06355 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,150.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Hawes, Beverly 384 Laurel Road New Canaan CT 06840 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Hawes, Rodney, Jr. 384 Laurel Road New Canaan CT 06840 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Hayes, David 740 Ocean Avenue New London CT 06320 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,300.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$3,900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Hayes, Richard 1481 Pleasant Valley Road Manchester CT 06040 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$456.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Halbig, Robert 126 Prospect Hill Rd. Groton CT 06340 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Noank Shipyard Occupation Owner Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code Heller, Harry 732 Norwich New London Tpke. Uncasville CT 06382 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Heller, Heller and McCoy Occupation Attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Hickox, Paul 1000 Vicars Landing Way B-104 Ponte Vedra Beach FL 32082 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$406.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Hume, Leslie 235 Locust St. San Francisco CA 94118 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Jardines, Eliot 1383 Northgate Square Reston VA 20190 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Open Source Publishing, Inc. Occupation Manager Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$300.00
G. Full Name, Mailing Address and ZIP Code Johnstone, Lucia P.O. Box 222 Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Pequot Properties Occupation Realtor Aggregate Year-to-Date > \$556.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Jones, Norma 11 Main Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,050.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code Jordan, Kevin 201 Sawmill Hill Rd. Stirling CT 06377 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Jordan Sawmill Occupation Owner Aggregate Year-to-Date > \$800.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Kelly, Corinne 525 N. Stonington Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$150.00
D. Full Name, Mailing Address and ZIP Code Kelly, Sue US House of Representatives Washington DC 20515 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Washington, DC Occupation State Representative Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Kempner, Thomas 45 East 82nd St. Apt 7E New York NY 10028 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer MH Davidson & Co. Occupation Executive Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code Klimek, Robert 741 Broad St. Ext. Waterford CT 06385 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Shoreline Eye Group Occupation Physician Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Knight, Doris 414 Old Tavern Road Orange CT 06477 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Knights, Inc. Occupation President Aggregate Year-to-Date > \$1,300.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$3,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 13 OF 19

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Koval, Gary 26 Charter Oak Sq. Mansfield Center CT 06250 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Reliable Data Products Occupation Owner Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code Kriebel, Helen 6017 North Villard Court Parker CO 80134 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer High Prairie Occupation President Aggregate Year-to-Date > \$900.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$900.00
C. Full Name, Mailing Address and ZIP Code Kyle, Alan 173 Blood Street Old Lyme CT 06371 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer CT Dept. of Labor Occupation Staff Aggregate Year-to-Date > \$800.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Kyle, Brian 95 Boston Post Road Old Lyme CT 06371 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Saputo Cheese Occupation Sales Aggregate Year-to-Date > \$700.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Lee, Lelighton, III 141 N Cove Rd. Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Lee Company Occupation Executive Aggregate Year-to-Date > \$400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$150.00
F. Full Name, Mailing Address and ZIP Code Leib, Dorothy B 5 Granite Street New London CT 06320 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and ZIP Code Lent, Louise M. 19 Daleville Road Storrs Mansfield CT 06268 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1,750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 12 OF 19

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Lichtblau, George 23 Pinpack Rd. Ridgefield CT 06877 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Axion International Occupation Trader Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Lindner, Thomas P.O. Box 173 Deep River CT 06417 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Essex Savings Bank Occupation Banker Aggregate Year-to-Date > \$600.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and ZIP Code Little, Heidi 12228 Lincoln Lake Way No. 1208 Fairfax VA 22030 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Reston Hospital Occupation Nurse Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/17/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code Littman, Bruce H., Dr. 28 Prentice William Road Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Pfizer Occupation Physician Aggregate Year-to-Date > \$791.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and ZIP Code Logan, James 81 Castle Hill Rd. Windham NH 03087 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Gotuit Media Occupation Computer Executive Aggregate Year-to-Date > \$900.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$900.00
F. Full Name, Mailing Address and ZIP Code MacArthur, Alicia 2299 Crestbrook Medford OR 97504 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$331.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code Malczynsky, Jay 25 Parkers Point Road Chester CT 06412 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Lobbyist Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$3,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page

PAGE 13 OF 19

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Mayer, George L. 2 Andrews Road Essex CT 06426 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Manhattan Realty Occupation Real Estate Aggregate Year-to-Date > \$350.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code McCreary, Edward 26 Diving Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Signal Projects Co. Occupation Editor Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code McLaughlin, Joseph 12 Colonial Lane Riverside CT 06878 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Brown & Wood LLP Occupation Attorney Aggregate Year-to-Date > \$225.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$225.00
D. Full Name, Mailing Address and ZIP Code Mihaly, Serge 111 Booth Hill Rd. Trumbull CT 06611 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Milanytch, Nicholas I 51 4th Avenue Waterford CT 06385 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer NIN Services Occupation Consultant Aggregate Year-to-Date > \$230.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and ZIP Code Miller, Donald 588 Round Hill Rd. Greenwich CT 06831 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Axiom International Occupation Trader Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code Moorhead, Kenneth E. 42 Mount Hope Road Mansfield Center CT 06250 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$2,450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 14 OF 19

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Morris, Robert 99 Riverside Ave. Riverside CT 06878 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Axiom Occupation Chairman Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Nelson, Robert P.O.Box 308 11 Day Hill Road Hadlyme CT 06439 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$600.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Nichols, Neil 37 Main St. Essex CT 06426 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer T&O Richardson Occupation Executive Aggregate Year-to-Date > \$575.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code OBrian, Matthew 98 Timber Trail Coventry CT 06238 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Executive Recruiter Aggregate Year-to-Date > \$305.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$135.00
E. Full Name, Mailing Address and ZIP Code OBrien, Matthew 98 Timber Trail Coventry CT 06238 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Executive Recruiter Aggregate Year-to-Date > \$305.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$45.00
F. Full Name, Mailing Address and ZIP Code Okasha, Mahmoud, Dr. 18 Huntington Lane Norwich CT 06360 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and ZIP Code OMalley, Molra Kennedy 16 Diving St. Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Mom Aggregate Year-to-Date > \$750.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$750.00

SUBTOTAL of Receipts This Page (optional)

\$2,730.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 19

FOR LINE NUMBER

11(a)(i)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Ossan, Jeffray P.O. Box 215 North Windham CT 06258 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Attorney Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code Payne, Kenneth, Dr. 92 Wyassup Lake Road North Stonington CT 06359 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Consultant Aggregate Year-to-Date > \$300.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code Percy, Stephen 14 New Shore Road Waterford CT 06385 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Narug, Ltd. Occupation Real Estate Broker Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and ZIP Code Peterson, Charles P.O. Box 369 North Stonington CT 06359 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Real Estate Aggregate Year-to-Date > \$1,250.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and ZIP Code Popiel, Stanley 31 Front Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$194.00
F. Full Name, Mailing Address and ZIP Code Randall, Robert 70 Laurel Drive Woodstock CT 06281 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$800.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and ZIP Code Ricci, A. Katherine 8 Phelps Lane Deep River CT 06417 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Owen Analytics, Inc. Occupation Research Analyst Aggregate Year-to-Date > \$1,400.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$650.00

SUBTOTAL of Receipts This Page (optional)

\$2,494.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 16 OF 18
FOR LINE NUMBER
11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343821

A. Full Name, Mailing Address and ZIP Code Riordan, Marguerite 8 Pearl Street Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Antique Shop Occupation Owner Aggregate Year-to-Date > \$950.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and ZIP Code Robinson, Charles 254 Providence New London Tpke. North Stonington CT 06359 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and ZIP Code Shipman, William 4 Oak Ridge Dr. Gales Ferry CT 06335 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Shipco Occupation Owner Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$150.00
D. Full Name, Mailing Address and ZIP Code Silcer, Gail 561 Hartford Turnpike Vernon Rockville CT 06066 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Tax Preparer Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$150.00
E. Full Name, Mailing Address and ZIP Code Smith, Matthew 12 Standish Road Ellington CT 06029 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Accurate W-E, Inc. Occupation VP Aggregate Year-to-Date > \$600.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Southwick, Susan 200 Wyassup Road North Stonington CT 06359 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$825.00	Date (month, day, year) 10/26/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Stapleton, Dorothy 281 Lake Ave. Greenwich CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Political Consultant Aggregate Year-to-Date > \$300.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1,600.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 17 OF 18

FOR LINE NUMBER

17(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343821

A. Full Name, Mailing Address and ZIP Code Steele, Eleanor N. 144 E Shore Avenue Groton CT 06340 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Strater, Edward 248 Goose Lane Coventry CT 06238 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$900.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and ZIP Code Stripp, John E. 4 Scattacook Trail Weston CT 06883 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer CT General Assembly Occupation Representative Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code Tandogan, Mahmut 281 Gardner Ave. Unit G6 New London CT 06320 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Perfection Yacht Occupation Owner Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code Taylor, Karen 10 Lake View Circle Niantic CT 06357 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Housewife Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code Telage, Don 310 Pendleton Hill Rd. North Stonington CT 06359 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Interior Designer Occupation Patrick Gallagher Decor Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code Thompson, Lincoln 142 N Cove Rd. Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Virginia Industries Occupation Chairman Aggregate Year-to-Date > \$400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$150.00

SUBTOTAL of Receipts This Page (optional)

\$2,050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 16 OF 18

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Tolsdorf, Frank 2164 Via Fuentes Vero Beach FL 32963 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Superwinch Occupation Executive Aggregate Year-to-Date > \$900.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$900.00
B. Full Name, Mailing Address and ZIP Code Tyler, Timothy, Dr. Box 138 Stonington CT 06378 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Self-Employed Occupation Physician Aggregate Year-to-Date > \$251.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Uzanas, Raymond 3 Aloha Rd. Westerly RI 02891 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$300.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and ZIP Code Wheeler, Samuel P.O. Box 279 Willington CT 06279 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer UConn Occupation Professor Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and ZIP Code Whelan, George 18 Hill Rd. Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Whelan Eng. Co., Inc. Occupation Manufacturer Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code White, George 96 Shore Rd. Waterford CT 06385 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Eugene O'Neil Theat Occupation Theater Director Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and ZIP Code White, William 31 Vauxhall St New London CT 06320 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$2,850.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 19 OF 19

FOR LINE NUMBER

11(a)(1)

Contributions from Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Williamson, Edwin 1701 Pennsylvania Ave. NW Washington DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Sullivan & Cromwell Occupation Lawyer Aggregate Year-to-Date > \$450.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$450.00
B. Full Name, Mailing Address and ZIP Code Wilson, Ramsay P.O. Box 409 Old Lyme CT 06371 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date > \$250.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$250.00
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

\$49,928.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER

11(b)

Contributions from Party Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Ashford, RTC 165 Mansfield Rd. Ashford CT 06278 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Ashford Occupation Town Committee Aggregate Year-to-Date > \$100.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Chaplin, RTC P.O. Box 276 Chaplin CT 06235 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Chaplin Occupation Town Committee Aggregate Year-to-Date > \$133.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$75.00
C. Full Name, Mailing Address and ZIP Code Hebron, RTC 276 Hope Valley Rd. Amston CT 06231 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$50.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and ZIP Code New Canaan, RTC P.O. Box 42 New Canaan CT 06840 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Town of New Canaan Occupation Town Committee Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code Old Saybrook, RTC P.O. Box 204 Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Town of Old Saybrook Occupation Town Committee Aggregate Year-to-Date > \$100.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and ZIP Code Plainfield, RTC 784 Norwich Rd. Plainfield CT 06374 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Plainfield Occupation Town Committee Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$43.07
G. Full Name, Mailing Address and ZIP Code Plainfield, RTC 784 Norwich Rd. Plainfield CT 06374 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Plainfield Occupation Town Committee Aggregate Year-to-Date > \$300.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$256.93

SUBTOTAL of Receipts This Page (optional)

\$1,625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER
11(b)

Contributions from Party Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Sprague, RTC P.O. Box 602 Baltic CT 06330 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Sprague Occupation Town Committee Aggregate Year-to-Date > \$267.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$175.00
B. Full Name, Mailing Address and ZIP Code Westbrook, RTC 51 Trout Lake Dr. Westbrook CT 06498 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Town of Westbrook Occupation Town Committee Aggregate Year-to-Date > \$350.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and ZIP Code Women Of Bolton, Republican 11 Dean Dr. Bolton CT 06043 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Bolton Occupation Republican Women Aggregate Year-to-Date > \$400.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$150.00
D. Full Name, Mailing Address and ZIP Code Women Of Old Saybrook, Republican 14 Pennywise Lane Old Saybrook CT 06475 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Old Saybrook Women Occupation Political Committee Aggregate Year-to-Date > \$850.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$50.00
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$1,225.00

TOTAL This Period (last page this line number only)

\$2,850.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 11

FOR LINE NUMBER
11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, 96 P.O. Box 15080 Washington DC 20003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer 96 Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code PAC, AHM 1201 New York Ave. NW St. 600 Washington DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer American Hotel & Motel Assoc Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, ALL P.O. Box 1984 Fort Smith AR 72902 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Americans For Law and Liberty Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code PAC, ALL P.O. Box 1984 Fort Smith AR 72902 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Americans For Law and Liberty Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$2,500.00
E. Full Name, Mailing Address and ZIP Code PAC, American Dental 1111 14th St. NW Suite 1100 Washington DC 20005 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer American Dental Association Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, American Prospe 1155 21st St. NW Suite 300 Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer American Prosperity PAC Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, American Succes 1155 21st St. NW Suite 300 Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer American Success Occupation PAC Aggregate Year-to-Date > \$4,000.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$3,000.00

SUBTOTAL of Receipts This Page (optional)

\$10,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Amgen 1840 De Havilland Dr. Newbury Park CA 91320 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Amgen Occupation PAC Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,500.00
B. Full Name, Mailing Address and ZIP Code PAC, Anthem 120 Monument Circle Indianapolis IN 46204 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Anthem Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and ZIP Code PAC, Baker For Cong. P.O. Box 1894 Baton Rouge LA 70821 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Richard Baker Occupation Political Committee Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code PAC, Bayou Leader 524 Fort Williams Pkwy. Alexandria VA 22304 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Bayou Leader Occupation PAC Aggregate Year-to-Date > \$3,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$2,000.00
E. Full Name, Mailing Address and ZIP Code PAC, Chris Shays For 132 E Putnam Ave. Rm 2 West Cos Cob CT 06807 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Chris Shays Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, Club For Growth 1776 K St. NW Suite 300 Washington DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Club For Growth Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, Club For Growth 1776 K St. NW Suite 300 Washington DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Club For Growth Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$8,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 11

FOR LINE NUMBER
11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Coble For Cong P.O. Box 1777 Greensboro NC 27402 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Coble For Congress Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code PAC, Cong Maj Comm 555 13th St 500 West Washington DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Congressional Majority Committ Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$5,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Congressional L P.O. Box 8708 Laguna Beach CA 92652 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Congressional Leadership Fund Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code PAC, CPC P.O. Box 22614 Alexandria VA 22304 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Preservation of Capitalism Occupation PAC Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$2,000.00
E. Full Name, Mailing Address and ZIP Code PAC, CURT P.O. Box 32284 Washington DC 20007 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Comm For a United Repub Team Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, Cyber Security P.O. Box 150998 Alexandria VA 22315 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Cyber Security Occupation PAC Aggregate Year-to-Date > \$100.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and ZIP Code PAC, Equality Fund Lead P.O. Box 1676 Casper WY 82602 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Equality Fund Leadership Occupation PAC Aggregate Year-to-Date > \$26.92	Date (month, day, year) 11/10/2000	Amount of Each Receipt this Period \$26.92 In-Kind

SUBTOTAL of Receipts This Page (optional)

\$9,626.92

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of this Detailed Summary Page

PAGE 4 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Exxon Mobil 5959 Las Colinas Blvd. Irving TX 75039 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Exxon Mobile Occupation PAC Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$2,000.00
B. Full Name, Mailing Address and ZIP Code PAC, Federal Victory 6429 Downing Ct. Annandale VA 22003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Federal Victory Fund Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 10/20/2000	Amount of Each Receipt this Period \$5,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Fr of Rog Wicke P.O. Box 874 Tupelo MS 38802 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Roger Wicker Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
D. Full Name, Mailing Address and ZIP Code PAC, Freedom Project P.O. Box 507 West Chester OH 45069 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Freedom Project Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$5,000.00
E. Full Name, Mailing Address and ZIP Code PAC, Frelinghuysen F Chancery Square 19 Cattano Ave. Morristown NJ 07960 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Frelinghuysen For Congress Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, Fund For A Free 613 S Taylor St. Arlington VA 22204 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Fund For A Free Market America Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, Fund For A Resp P.O. Box 528 Washington DC 20044 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Fund for Responsible Future Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$16,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Future Leaders 1155 21st St. NW Ste 300 Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Future Leaders Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$5,000.00
B. Full Name, Mailing Address and ZIP Code PAC, General Dynamic 3190 Fairview Park Dr. Falls Church VA 22042 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer General Dynamics Occupation PAC Aggregate Year-to-Date > \$5,000.00	Date (month, day, year) 11/17/2000	Amount of Each Receipt this Period \$5,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Hi 555 13th St. NW Suite 600 East Washington DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Health Insurance Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/17/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code PAC, Hobson For Cong 82 W Columbia St. Springfield OH 45502 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Hobson For Congress Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
E. Full Name, Mailing Address and ZIP Code PAC, Hoosier P.O. Box 77089 Washington DC 20013 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Hoosier Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, Instinet 875 Third Ave. New York NY 10022 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Instinet Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, IP 1101 Pennsylvania Ave. NW Suite 200 Washington DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer International Paper Occupation PAC Aggregate Year-to-Date > \$2,500.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$2,500.00

SUBTOTAL of Receipts This Page (optional)

\$15,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Issa For Congre P.O. Box 760 Vista CA 92085 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Issa For Congress Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code PAC, Judy Biggert Fo P.O. Box 637 Hinsdale IL 60522 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Judy Biggert Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Keep Our Majori P.O. Box 864 Washington DC 20044 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Keep Our Majority Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$2,500.00
D. Full Name, Mailing Address and ZIP Code PAC, Keep Our Majori P.O. Box 864 Washington DC 20044 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Keep Our Majority Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$2,500.00
E. Full Name, Mailing Address and ZIP Code PAC, Koble For Cong. P.O. Box 31568 Tucson AZ 85751 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Jim Koble Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, Leadership 2000 1199 North Fairfax St. Alexandria VA 22314 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Leadership 2000 Occupation PAC Aggregate Year-to-Date > \$2,500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$2,500.00
G. Full Name, Mailing Address and ZIP Code PAC, Lewis For Cong. P.O. Box 247 Redlands CA 92373 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Jerry Lewis Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$11,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 11

FOR LINE NUMBER
11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Media Fusion P.O. Box 150998 Alexandria VA 22315 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Media Fusion Occupation PAC Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and ZIP Code PAC, Nancy Johnson C P.O. Box 1986 New Britain CT 06050 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Nancy Johnson For Congress Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Nat Defense P.O. Box 150990 Alexandria VA 22315 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer National Defense PAC Occupation PAC Aggregate Year-to-Date > \$250.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and ZIP Code PAC, Nat. Rest. Asso 1200 Seventeenth St. NW Washington DC 20038 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer National Restaurant Associatio Occupation PAC Aggregate Year-to-Date > \$2,500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$1,500.00
E. Full Name, Mailing Address and ZIP Code PAC, Nat. Rest. Asso 1200 Seventeenth St. NW Washington DC 20038 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer National Restaurant Associatio Occupation PAC Aggregate Year-to-Date > \$2,500.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
F. Full Name, Mailing Address and ZIP Code PAC, National Beer W 1100 S. Washington Street Alexandria VA 22314 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer National Beer Wholesaler Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$2,500.00
G. Full Name, Mailing Address and ZIP Code PAC, National Beer W 1100 S. Washington Street Alexandria VA 22314 Receipt For: ☒ Primary ☐ General ☐ Other (Specify):	Name of Employer National Beer Wholesaler Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$2,500.00

SUBTOTAL of Receipts This Page (optional)

\$9,000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 8 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, New Amer Centur 1155 21st St. NW Ste 20036 Washington DC 20036 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer New American Century Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code PAC, NFIB 1201 F Street NW Suite 200 Washington DC 20004 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer NFIB Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$2,500.00
C. Full Name, Mailing Address and ZIP Code PAC, NRCC 320 First Street SE Washington DC 20003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer NRCC Occupation PAC Aggregate Year-to-Date > \$9,551.00	Date (month, day, year) 10/31/2000	Amount of Each Receipt this Period \$51.00 In-Kind
D. Full Name, Mailing Address and ZIP Code PAC, NY Mercantile E 1 North End Ave. World Financial C tr. New York NY 10282 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer NY Mercantile Exchange Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code PAC, Olin Good Gover 1156 Lwr River Rd. P.O. Box 248 Charleston TN 37310 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Olin Good Government Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code PAC, Peoples Bank Fa P.O. Box 1580 Bridgeport CT 06601 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Peoples Bank Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/03/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, Pioneer 499 S Capital St 408 Washington DC 20003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Pioneer Occupation PAC Aggregate Year-to-Date > \$3,874.39	Date (month, day, year) 11/10/2000	Amount of Each Receipt this Period \$1,161.00 In-Kind

SUBTOTAL of Receipts This Page (optional)

\$6,712.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 9 OF 11

FOR LINE NUMBER

11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Porter Goss P.O. Box 517 Fort Myers FL 33902 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Porter Goss Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and ZIP Code PAC, Powerline Comm P.O. Box 150998 Alexandria VA 22315 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Powerline Communications Occupation PAC Aggregate Year-to-Date > \$100.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and ZIP Code PAC, Realtors 430 N Michigan Ave. Chicago IL 60611 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Realtors Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$5,000.00
D. Full Name, Mailing Address and ZIP Code PAC, Reform P.O. Box 15283 Washington DC 20003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Reform Occupation PAC Aggregate Year-to-Date > \$2,000.00	Date (month, day, year) 10/27/2000	Amount of Each Receipt this Period \$2,000.00
E. Full Name, Mailing Address and ZIP Code PAC, Rep Lead Coun 3222 M Street NW Suite U501 Washington DC 20007 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Republican Leadership Council Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and ZIP Code PAC, RoyB P.O. Box 5412 Arlington VA 22205 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Rely On Your Beliefs Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, Sac Lead Fund 455 Capitol Mall Suite 801 Sacramento CA 95814 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Sacramento Valley Leadership F Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/13/2000	Amount of Each Receipt this Period \$1,000.00

SUBTOTAL of Receipts This Page (optional)

\$10,100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 10 OF 11
FOR LINE NUMBER 11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, State Rep. Part 97 Elm Street Hartford CT 06106 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer State Republican Party Occupation PAC Aggregate Year-to-Date > \$10,000.00	Date (month, day, year) 10/25/2000	Amount of Each Receipt this Period \$5,000.00
B. Full Name, Mailing Address and ZIP Code PAC, Straight Talk A P.O. Box 77141 Washington DC 20013 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Straight Talk America Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Truck 430 First St. Washington DC 20003 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Truck PAC Occupation PAC Aggregate Year-to-Date > \$3,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$2,000.00
D. Full Name, Mailing Address and ZIP Code PAC, Trust P.O. Box 221543 Chantilly VA 20153 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Trust Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 11/06/2000	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and ZIP Code PAC, US Chamber 1615 H Street N.W. Washington DC 20062 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer US Chamber Occupation PAC Aggregate Year-to-Date > \$3,500.00	Date (month, day, year) 11/01/2000	Amount of Each Receipt this Period \$2,500.00
F. Full Name, Mailing Address and ZIP Code PAC, Us Marine Repair P.O. Box 13308 San Diego CA 92113 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer US Marine Repair Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 11/04/2000	Amount of Each Receipt this Period \$1,000.00
G. Full Name, Mailing Address and ZIP Code PAC, Us Team 100 West Putnam Ave. Greenwich CT 06830 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer US Team Occupation PAC Aggregate Year-to-Date > \$500.00	Date (month, day, year) 10/24/2000	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$12,500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER
11(c)

Contributions from Other Political Committees

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code PAC, Wally Harger Fo P.O. Box 1500 Chico CA 95927 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Wally Harger Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
B. Full Name, Mailing Address and ZIP Code PAC, Walsh For Cong. 306 Winkworth Pkway Syracuse NY 13215 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Jim Walsh Occupation PAC Aggregate Year-to-Date > \$1,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$1,000.00
C. Full Name, Mailing Address and ZIP Code PAC, Wholesaler Dist 1725 K St. Suite 710 Washington DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Wholesaler Distributor Occupation PAC Aggregate Year-to-Date > \$1,500.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and ZIP Code PAC, Wisconsin Leade 888 Sixteenth St. NW 7th Fl. Washington DC 20006 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Wisconsin Leadership PAC Occupation PAC Aggregate Year-to-Date > \$3,000.00	Date (month, day, year) 10/28/2000	Amount of Each Receipt this Period \$3,000.00
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$5,500.00

TOTAL This Period (last page this line number only)

\$114,936.92

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER
15

Other Receipts

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Washington Trust Main Street Westerly RI 02891 Receipt For: ☐ Primary ☒ General ☐ Other (Specify):	Name of Employer Occupation Aggregate Year-to-Date > \$3,672.89	Date (month, day, year) 11/05/2000	Amount of Each Receipt this Period \$313.40 Interest Earned INTEREST/DIVIDEND
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period
Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (Specify):	Name of Employee Occupation Aggregate Year-to-Date >	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$313.40

TOTAL This Period (last page this line number only)

\$313.40

SCHEDULE B

ITEMIZED DISBURSEMENTS

Operating Expenditures

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

PAGE 1 OF 11

FOR LINE NUMBER
17

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Admin Unemploy Comp Route 91 East Granby CT 06026	Purpose of Disbursement Taxes Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/30/2000	Amount of Each Disbursement this Period \$909.56
B. Full Name, Mailing Address and ZIP Code AGJO 173 South Broad Street Pawcatuck CT 06379	Purpose of Disbursement Campaign Literature Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$9,641.55
C. Full Name, Mailing Address and ZIP Code American Legion Dept. of CT 81 Blackhall St. New London CT 06320	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/03/2000	Amount of Each Disbursement this Period \$600.00
D. Full Name, Mailing Address and ZIP Code Amy Pellegrino 16 Little Brook Rd. Westerly RI 02891	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/03/2000	Amount of Each Disbursement this Period \$300.00
E. Full Name, Mailing Address and ZIP Code Amy Pellegrino 16 Little Brook Rd. Westerly RI 02891	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$668.50
F. Full Name, Mailing Address and ZIP Code AT and T P.O. Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$396.47
G. Full Name, Mailing Address and ZIP Code AT and T P.O. Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$63.01
H. Full Name, Mailing Address and ZIP Code AT and T P.O. Box 2971 Omaha NE 68103	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/21/2000	Amount of Each Disbursement this Period \$700.93
I. Full Name, Mailing Address and ZIP Code B And A Advertising 241 Main St. P.O. Box 468 Norwich CT 06360	Purpose of Disbursement Campaign Literature Yard signs Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$2,374.96

SUBTOTAL of Disbursements This Page (optional)

\$15,694.98

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 11

FOR LINE NUMBER
17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Biznessonline.com P.O. Box 80 Johnstown NY 12095	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$118.00
B. Full Name, Mailing Address and ZIP Code Carol Parsi 310 Boston Post Road Waterford CT 06385	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$280.34
C. Full Name, Mailing Address and ZIP Code Carol Parsi 310 Boston Post Road Waterford CT 06385	Purpose of Disbursement Office Expenses Supplies from Staples Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$116.70
D. Full Name, Mailing Address and ZIP Code Carol Parsi 310 Boston Post Road Waterford CT 06385	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/27/2000	Amount of Each Disbursement this Period \$688.50
E. Full Name, Mailing Address and ZIP Code Cheryl Klock 510 Pequot Avenue New London CT 06320	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/27/2000	Amount of Each Disbursement this Period \$6,000.00
F. Full Name, Mailing Address and ZIP Code Cheryl Klock 510 Pequot Avenue New London CT 06320	Purpose of Disbursement Campaign Workers' Salaries 11/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$1,928.72
G. Full Name, Mailing Address and ZIP Code Cheryl Klock 510 Pequot Avenue New London CT 06320	Purpose of Disbursement Campaign Workers' Salaries 11/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$1,928.72
H. Full Name, Mailing Address and ZIP Code Cheryl Klock 510 Pequot Avenue New London CT 06320	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/28/2000	Amount of Each Disbursement this Period \$699.75
I. Full Name, Mailing Address and ZIP Code Citadel Communications 7 Governor Winthrop Blvd. New London CT 06320	Purpose of Disbursement Media Radio Ads Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$2,000.00

SUBTOTAL of Disbursements This Page (optional)

\$13,762.73

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 3 OF 11
FOR LINE NUMBER 17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Citizens Bank West Broad Street Pawcatuck CT 06379	Purpose of Disbursement Bank Service Charge Bank Service Charge Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$7.00
B. Full Name, Mailing Address and ZIP Code Citizens Bank West Broad Street Pawcatuck CT 06379	Purpose of Disbursement Bank Service Charge Bank Service Charge Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$7.00
C. Full Name, Mailing Address and ZIP Code Citizens Bank West Broad Street Pawcatuck CT 06379	Purpose of Disbursement Bank Service Charge Bank Service Charge Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$123.00
D. Full Name, Mailing Address and ZIP Code Citizens Bank West Broad Street Pawcatuck CT 06379	Purpose of Disbursement Payroll Taxes Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$3,717.59
E. Full Name, Mailing Address and ZIP Code Claude Laroche 660 Mast Road Manchester NH 03102	Purpose of Disbursement Campaign Literature Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$2,150.00
F. Full Name, Mailing Address and ZIP Code Comcast Cable 401 Gold Star Highway Groton CT 06340	Purpose of Disbursement Television Ads Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$111.67
G. Full Name, Mailing Address and ZIP Code Comm. Of Revenue Services 451 High Street Hartford CT 06103	Purpose of Disbursement Ct Witholding Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$420.27
H. Full Name, Mailing Address and ZIP Code Computer Lab Broad St. Waterford CT 06385	Purpose of Disbursement Office Expenses Printer repair Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$376.30
I. Full Name, Mailing Address and ZIP Code Conn. Light And Power P.O. Box 2960 Hartford CT 06104	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$176.79

SUBTOTAL of Disbursements This Page (optional)

\$7,091.62

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 4 OF 11
FOR LINE NUMBER 17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Ct Cable Advertising Long Hill Rd. Groton CT 06340	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/30/2000	Amount of Each Disbursement this Period \$3,840.24
B. Full Name, Mailing Address and ZIP Code Culinary Capers 83 Williams Ave. Mystic CT 06355	Purpose of Disbursement Other (Enter Description) Culinary Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$91.24
C. Full Name, Mailing Address and ZIP Code Days Inn Of Mystic 55 Whitehall Rd. Mystic CT 06355	Purpose of Disbursement Other (Enter Description) Days Inn Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/07/2000	Amount of Each Disbursement this Period \$462.52
D. Full Name, Mailing Address and ZIP Code Grand Image 12 Kane Industrial Dr. Hudson MA 01749	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$320.00
E. Full Name, Mailing Address and ZIP Code Grand Image 12 Kane Industrial Dr. Hudson MA 01749	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/30/2000	Amount of Each Disbursement this Period \$410.00
F. Full Name, Mailing Address and ZIP Code Jane Dauphinais 37 Marlin Drive Groton CT 06340	Purpose of Disbursement Campaign Workers' Salaries 11/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$984.31
G. Full Name, Mailing Address and ZIP Code Jane Dauphinais 37 Marlin Drive Groton CT 06340	Purpose of Disbursement Campaign Workers' Salaries 11/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$984.31
H. Full Name, Mailing Address and ZIP Code Jane Dauphinais 37 Marlin Drive Groton CT 06340	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$1,319.39
I. Full Name, Mailing Address and ZIP Code Jane Dauphinais 37 Marlin Drive Groton CT 06340	Purpose of Disbursement Other (Enter Description) DC Trip Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$606.34

SUBTOTAL of Disbursements This Page (optional)

\$9,018.35

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 5 OF 11

FOR LINE NUMBER 17

Operating Expenditures

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)		C00343821	
A. Full Name, Mailing Address and ZIP Code Jeff Nelson 132 Oswegatchie Rd. Waterford CT 06385	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$788.00
B. Full Name, Mailing Address and ZIP Code Jeff Nelson 132 Oswegatchie Rd. Waterford CT 06385	Purpose of Disbursement Campaign Workers' Salaries 11/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$788.00
C. Full Name, Mailing Address and ZIP Code Jeff Nelson 132 Oswegatchie Rd. Waterford CT 06385	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$188.50
D. Full Name, Mailing Address and ZIP Code Jeff Nelson 132 Oswegatchie Rd. Waterford CT 06385	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$68.91
E. Full Name, Mailing Address and ZIP Code Joe Bell 106 Whitehall Avenue Mystic CT 06355	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$830.00
F. Full Name, Mailing Address and ZIP Code Joe Bell 106 Whitehall Avenue Mystic CT 06355	Purpose of Disbursement Campaign Workers' Salaries 11/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$830.00
G. Full Name, Mailing Address and ZIP Code Joe Bell 106 Whitehall Avenue Mystic CT 06355	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$888.50
H. Full Name, Mailing Address and ZIP Code Keelan Communications P.O. Box 2776 Arlington VA 22202	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$11,832.47
I. Full Name, Mailing Address and ZIP Code Kevin McNeil 324 Glenwood Ave. New London CT 06320	Purpose of Disbursement Campaign Workers' Salaries 10/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$991.00

SUBTOTAL of Disbursements This Page (optional)

\$17,485.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use space on schedule to
attach category of the
Detailed Summary Page

PAGE 5 OF 11

FOR LINE NUMBER
17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Kevin McNeil 324 Glenwood Ave. New London CT 06320	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$991.00
B. Full Name, Mailing Address and ZIP Code Michael Blair Cutler Street Stonington CT 06378	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$3,101.91
C. Full Name, Mailing Address and ZIP Code Michael Blair Cutler Street Stonington CT 06378	Purpose of Disbursement Other (Enter Description) Misc. Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/17/2000	Amount of Each Disbursement this Period \$500.00
D. Full Name, Mailing Address and ZIP Code Milas Office Supply 12 Roosevelt Ave. Mystic CT 06355	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/27/2000	Amount of Each Disbursement this Period \$8.35
E. Full Name, Mailing Address and ZIP Code Milas Office Supply 12 Roosevelt Ave. Mystic CT 06355	Purpose of Disbursement Office Expenses Printer Cartridge Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/23/2000	Amount of Each Disbursement this Period \$31.48
F. Full Name, Mailing Address and ZIP Code Milas Office Supply 12 Roosevelt Ave. Mystic CT 06355	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$126.87
G. Full Name, Mailing Address and ZIP Code Milas Office Supply 12 Roosevelt Ave. Mystic CT 06355	Purpose of Disbursement Office Expenses Joe's notebooks Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$27.24
H. Full Name, Mailing Address and ZIP Code Nextel 201 Route 17 North Rutherford NJ 07070	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$896.98
I. Full Name, Mailing Address and ZIP Code Norwich Navigators 14 Scott St. Norwich CT 06360	Purpose of Disbursement Fundraising Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$850.50

SUBTOTAL of Disbursements This Page (optional)

\$6,534.33

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 11
FOR LINE NUMBER
17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code NRCC 320 First Street SE Washington DC 20003	Purpose of Disbursement Media McCain TV Shoot Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$480.00
B. Full Name, Mailing Address and ZIP Code PAC, Equality Fund Lead P.O. Box 1676 Casper WY 82602	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/10/2000	Amount of Each Disbursement this Period \$26.92
C. Full Name, Mailing Address and ZIP Code PAC, NRCC 320 First Street SE Washington DC 20003	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$51.00
D. Full Name, Mailing Address and ZIP Code PAC, Pioneer 499 S Capital St 406 Washington DC 20003	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/10/2000	Amount of Each Disbursement this Period \$1,161.00
E. Full Name, Mailing Address and ZIP Code Postmaster Mystic Main Street Mystic CT 06355	Purpose of Disbursement Postage Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/27/2000	Amount of Each Disbursement this Period \$3,300.00
F. Full Name, Mailing Address and ZIP Code Postmaster Mystic Main Street Mystic CT 06355	Purpose of Disbursement Postage Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/10/2000	Amount of Each Disbursement this Period \$198.00
G. Full Name, Mailing Address and ZIP Code Pound And Co. 428 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media RS-00-001 Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/28/2000	Amount of Each Disbursement this Period \$14,885.15
H. Full Name, Mailing Address and ZIP Code Private Label Specialists 11 Lance Lane Goffstown NH 03045	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$306.00
I. Full Name, Mailing Address and ZIP Code Public Opinion Strategies 277 S. Washington St. Suite 320 Alexandria VA 22314	Purpose of Disbursement Media Polling Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$7,350.00

SUBTOTAL of Disbursements This Page (optional)

\$27,758.07

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 8 OF 11

FOR LINE NUMBER

17

Operating Expenditures

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)			
Simmons for Congress			C00343921
A. Full Name, Mailing Address and ZIP Code Randy Collins 67 Robin Road Apt. B4 W Hartford CT 06119	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$646.00
B. Full Name, Mailing Address and ZIP Code Randy Collins 67 Robin Road Apt. B4 W Hartford CT 06119	Purpose of Disbursement Campaign Workers' Salaries 11/1/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/15/2000	Amount of Each Disbursement this Period \$646.00
C. Full Name, Mailing Address and ZIP Code Randy Collins 67 Robin Road Apt. B4 W Hartford CT 06119	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$688.50
D. Full Name, Mailing Address and ZIP Code Ryan Suerth 11661 Picturesque Drive Studio City CA 91604	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$688.50
E. Full Name, Mailing Address and ZIP Code Ryan Suerth 11661 Picturesque Drive Studio City CA 91604	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$874.87
F. Full Name, Mailing Address and ZIP Code Ryan Suerth 11661 Picturesque Drive Studio City CA 91604	Purpose of Disbursement Other (Enter Description) Election Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$79.91
G. Full Name, Mailing Address and ZIP Code Ryan Suerth 11661 Picturesque Drive Studio City CA 91604	Purpose of Disbursement Campaign Workers' Salaries Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/14/2000	Amount of Each Disbursement this Period \$874.87
H. Full Name, Mailing Address and ZIP Code Seamens Inne Mystic Seaport Mystic CT 06355	Purpose of Disbursement Other (Enter Description) Seamens Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/06/2000	Amount of Each Disbursement this Period \$2,903.15
I. Full Name, Mailing Address and ZIP Code Simmons, Robert P.O. Box 268 Stonington CT 06378	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/27/2000	Amount of Each Disbursement this Period \$2,200.00

SUBTOTAL of Disbursements This Page (optional)

\$9,601.80

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 9 OF 11

FOR LINE NUMBER
17

Operating Expenditures

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Simmons, Robert P.O. Box 268 Stonington CT 06378	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/27/2000	Amount of Each Disbursement this Period \$300.00
B. Full Name, Mailing Address and ZIP Code Simmons, Robert P.O. Box 268 Stonington CT 06378	Purpose of Disbursement IN-KIND RECEIVED Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/27/2000	Amount of Each Disbursement this Period \$829.72
C. Full Name, Mailing Address and ZIP Code SNET P.O. Box 8387 New Haven CT 06530	Purpose of Disbursement Office Expenses Vernon Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/31/2000	Amount of Each Disbursement this Period \$528.00
D. Full Name, Mailing Address and ZIP Code SNET P.O. Box 8387 New Haven CT 06530	Purpose of Disbursement Office Expenses Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/19/2000	Amount of Each Disbursement this Period \$554.60
E. Full Name, Mailing Address and ZIP Code SNET P.O. Box 8387 New Haven CT 06530	Purpose of Disbursement Office Expenses Telephone Deposit Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/27/2000	Amount of Each Disbursement this Period \$1,200.00
F. Full Name, Mailing Address and ZIP Code Susan Bessette 33 Mayflower Avenue Pawcatuck CT 06379	Purpose of Disbursement Other (Enter Description) Engraving Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/27/2000	Amount of Each Disbursement this Period \$85.00
G. Full Name, Mailing Address and ZIP Code Susan Bessette 33 Mayflower Avenue Pawcatuck CT 06379	Purpose of Disbursement Campaign Workers' Salaries 10/15/00 - Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/01/2000	Amount of Each Disbursement this Period \$769.00
H. Full Name, Mailing Address and ZIP Code Susan Bessette 33 Mayflower Avenue Pawcatuck CT 06379	Purpose of Disbursement Campaign Workers' Salaries 80 Hrs. Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/14/2000	Amount of Each Disbursement this Period \$783.00
I. Full Name, Mailing Address and ZIP Code Susan Bessette 33 Mayflower Avenue Pawcatuck CT 06379	Purpose of Disbursement Campaign Workers' Salaries Bonus Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$688.50

SUBTOTAL of Disbursements This Page (optional)

\$5,737.82

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 10 OF 11

FOR LINE NUMBER

17

Operating Expenditures

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Susan Bessette 33 Mayflower Avenue Pawcatuck CT 06379	Purpose of Disbursement Office Expenses Carpet Cleaner Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/16/2000	Amount of Each Disbursement this Period \$35.94
B. Full Name, Mailing Address and ZIP Code Tech Services Of Ct 98 Knight Street Watertown CT 06795	Purpose of Disbursement Media Election Night Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$2,100.00
C. Full Name, Mailing Address and ZIP Code Tees Plus P.O. Box 18104 Bridgeport CT 06601	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$107.40
D. Full Name, Mailing Address and ZIP Code The Paultpaug Group 172 Paultpaug Hill Road Baltic CT 06330	Purpose of Disbursement Fundraising Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$652.50
E. Full Name, Mailing Address and ZIP Code Waterbury Printing 136 Church Street Naugatuck CT 06770	Purpose of Disbursement Campaign Literature Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$695.47
F. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media 127-040 Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/22/2000	Amount of Each Disbursement this Period \$572.58
G. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media 127-040 Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/21/2000	Amount of Each Disbursement this Period \$10,000.00
H. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/04/2000	Amount of Each Disbursement this Period \$20,000.00
I. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media 027, 029, 030, 031, 033, 034, 038 Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$3,271.36

SUBTOTAL of Disbursements This Page (optional)

\$37,435.25

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 11 OF 11

FOR LINE NUMBER
17

Operating Expenditures

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)		C00343921	
A. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Television Ads Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/25/2000	Amount of Each Disbursement this Period \$33,000.00
B. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Media Invoice RS-00-001 Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/25/2000	Amount of Each Disbursement this Period \$159,000.00
C. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Television Ads Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/25/2000	Amount of Each Disbursement this Period \$4,000.00
D. Full Name, Mailing Address and ZIP Code Wilson Grand Communications 429 N. Saint Asaph St. Alexandria VA 22314	Purpose of Disbursement Television Ads Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/19/2000	Amount of Each Disbursement this Period \$3,647.50
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

\$279,647.50

TOTAL This Period (last page this line number only)

\$429,767.83

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER
20(a)

Refunds of Contributions to Individuals

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)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and ZIP Code Fowler, Emily 50 Pound Ridge Road Bedford NY 10506	Purpose of Disbursement Refund of 10/24/2000 Contribution Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/24/2000	Amount of Each Disbursement this Period \$100.00
B. Full Name, Mailing Address and ZIP Code Holstein, John 12 Roosevelt Avenue Mystic CT 06355	Purpose of Disbursement Refund of 06/29/2000 Contribution Disbursement For: ☒ Primary ☐ General ☐ Other (Specify):	Date (month, day, year) 11/10/2000	Amount of Each Disbursement this Period \$500.00
C. Full Name, Mailing Address and ZIP Code Palmer, A. Wright 85 Main St. P.O. Box 728 Stonington CT 06378	Purpose of Disbursement Refund of 06/27/2000 Contribution Disbursement For: ☒ Primary ☐ General ☐ Other (Specify):	Date (month, day, year) 11/13/2000	Amount of Each Disbursement this Period \$500.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

\$1,100.00

TOTAL This Period (last page this line number only)

\$1,100.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER
20(b)

Refunds to Individuals

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)

Simmons for Congress

C00343521

A. Full Name, Mailing Address and ZIP Code New Canaan, RTC P.O. Box 42 New Canaan CT 06840	Purpose of Disbursement Refund of 10/20/2000 Contribution Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 10/20/2000	Amount of Each Disbursement this Period \$10.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

\$10.00

TOTAL This Period (last page this line number only)

\$10.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

Refunds to Political Party Committees

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

PAGE 1 OF 1

FOR LINE NUMBER
20(c)

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)			C00343821
A. Full Name, Mailing Address and ZIP Code PAC, Mashantucket Pe P.O. Box 3060 2 Mattis Path Ledyard CT 06339	Purpose of Disbursement Refund of 09/26/2000 Contribution Disbursement For: ☐ Primary ☒ General ☐ Other (Specify):	Date (month, day, year) 11/09/2000	Amount of Each Disbursement this Period \$100.00
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period
Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement For: ☐ Primary ☐ General ☐ Other (Specify):	Date (month, day, year)	Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

\$100.00

TOTAL This Period (last page this line number only)

\$100.00

SCHEDULE C

LOANS

PAGE 1 of 3 for
LINE NUMBER 10
(Use separate schedules
for each numbered line)

(Revised 3/80) Loans owed BY the Committee

Name of Committee (In Full)

Simmons for Congress

000343921

A. Full Name, Mailing Address and Zip Code of Loan Source

Chelsea Groton Savings Bank

West Broad St.

Pawcatuck, CT 06379

Election: ☐ Primary ☒ General ☐ Other (Specify):

Terms: Date Incurred 10/28/2000 Date Due 01/01/2000 Interest Rate 0 % (apr)

☐ Secured

Original Amount
of Loan

\$150,000.00

Cumulative
Payment To Date

\$0.00

Balance Outstanding
at Close of This Period

\$150,000.00

List All Endorsers or Guarantors (if any) to item

1. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

2. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

3. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

B. Full Name, Mailing Address and Zip Code of Loan Source

Personal Funds Simmons, Rob

12 Roosevelt Ave.

Mystic, CT 06355

Election: ☒ Primary ☐ General ☐ Other (Specify):

Terms: Date Incurred 06/30/2000 Date Due 11/30/2000 Interest Rate 0 % (apr)

☐ Secured

Original Amount
of Loan

\$4,000.00

Cumulative
Payment To Date

\$0.00

Balance Outstanding
at Close of This Period

\$4,000.00

List All Endorsers or Guarantors (if any) to item

1. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

2. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

3. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

\$154,000.00

Carry outstanding balance to LINE 3, Schedule D, for this link. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C

LOANS

PAGE 2 of 3 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

(Revised 3/80) Loans owed BY the Committee

Name of Committee (in Full) Simmons for Congress	C00343921
--	-----------

A. Full Name, Mailing Address and Zip Code of Loan Source Personal Funds Simmons, Rob 12 Roosevelt Ave. Mystic, CT 06355	Original Amount of Loan \$7,000.00	Cumulative Payment To Date \$0.00	Balance Outstanding at Close of This Period \$7,000.00
Election: ☒ Primary ☐ General ☐ Other (Specify):			

Terms: Date Incurred 06/30/2000 Date Due 11/30/2000 Interest Rate 0 %(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to item			
1. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00
2. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00
3. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00

B. Full Name, Mailing Address and Zip Code of Loan Source Personal Funds Simmons, Rob 12 Roosevelt Ave. Mystic, CT 06355	Original Amount of Loan \$11,000.00	Cumulative Payment To Date \$0.00	Balance Outstanding at Close of This Period \$11,000.00
Election: ☒ Primary ☐ General ☐ Other (Specify):			

Terms: Date Incurred 06/30/2000 Date Due 11/30/2000 Interest Rate 0 %(apr) ☐ Secured

List All Endorsers or Guarantors (if any) to item			
1. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00
2. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00
3. Full Name, Mailing Address and Zip Code	Name of Employer	Occupation	Amount Guaranteed Outstanding \$0.00

SUBTOTALS This Period This Page (optional)	\$18,000.00
TOTALS This Period (last page in this line only)	

Carry outstanding balance to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C

LOANS

PAGE 3 of 3 of
LINE NUMBER 10
(Use separate schedules
for each numbered line)

(Revised 3/80) Loans owed BY the Committee

Name of Committee (in Full)

Simmons for Congress

C00343921

A. Full Name, Mailing Address and Zip Code of Loan Source

Personal Funds Simmons, Rob

12 Roosevelt Ave.

Mystic, CT 06355

Original Amount
of Loan

\$30,000.00

Cumulative
Payment To Date

\$0.00

Balance Outstanding
at Close of This Period

\$30,000.00

Election: ☒ Primary ☐ General ☐ Other (Specify):

Terms: Date Incurred 06/30/2000 Date Due 11/30/2000 Interest Rate 0 % (apx)

☐ Secured

List All Endorsers or Guarantors (if any) to Item

1. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

2. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

3. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

\$0.00

B. Full Name, Mailing Address and Zip Code of Loan Source

Original Amount
of Loan

Cumulative
Payment To Date

Balance Outstanding
at Close of This Period

Election: ☐ Primary ☐ General ☐ Other (Specify):

Terms: Date Incurred Date Due Interest Rate % (apx)

☐ Secured

List All Endorsers or Guarantors (if any) to Item

1. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

2. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

3. Full Name, Mailing Address and Zip Code

Name of Employer

Occupation

Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)

TOTALS This Period (last page in this line only)

\$30,000.00

\$202,000.00

Carry outstanding balance to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C-1

Federal Election Commission
Washington, D.C. 20463Supplementary for Information
found on Page ____ of Schedule C

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

NAME OF COMMITTEE (IN FULL) SIMMONS FOR CONGRESS		FED IDENTIFICATION NUMBER 000343921	
FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDING INSTITUTION (LENDER) Chelsen Groton Bank 904 POCONONOC ROAD GROTON, CT 06340		AMOUNT OF LOAN 150,000.-	INTEREST RATE (APR) 9.59%
		DATE INCURRED OR ESTABLISHED 27 OCT 2000	DATE DUE 15 SEP 2010

A. Has loan been restructured? ☒ No ☐ Yes If yes, date originally incurred: _____B. If line of credit, amount of this draw: **150,000.-**; total outstanding balance: **150,000.-**

C. Are other parties secondarily liable for the debt incurred?

☒ No ☐ Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?

☐ No ☒ Yes If yes, specify: **REAL ESTATE, FARM & PROPERTY, VT**What is the value of this collateral? **\$255,000.-**Does the lender have a perfected security interest in it? ☐ No ☒ Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan?

☒ No ☐ Yes If yes, specify: _____ What is the estimated value? _____

A depository account must be established pursuant to 11 CFR 100.7(b)(11)(i)(B) and 100.8(b)(12)(i)(B). Date account

established: _____ Location of account: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER

TYPED NAME **ANNE SIMONE**

SIGNATURE

DATE

12/6/00

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

1. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

2. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

3. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.7(b)(11) and 100.8(b)(12) in making this loan.

AUTHORIZED REPRESENTATIVE

TYPED NAME **DAVID W. HAMERSTROM**

SIGNATURE

TITLE

SENIOR VICE PRESIDENT

DATE

12/1/2000

FEDORGE

12/1

under the designation "Money Rates" and shown as "prime rate" or "base rate on corporate loans posted by at least 75% of the nation's 30 largest banks," or similar words used by the Journal or its successor. If more than one rate is shown, we use the highest. For each Billing Cycle after the 12th complete Billing Cycle, we use the last index published in the Journal before the start of the applicable Billing Cycle.

(b)(ii) The "Margin" equals 0.0000 percentage point(s).

(b) Starting with the 13th complete Billing Cycle, the daily periodic rate and the annual percentage rate will go up each Billing Cycle if the last index published before the start of the Billing Cycle goes up, subject, however, to the limit set forth in subsection 11.5(e) below.

(c) If the index becomes unavailable, we can change to a new index and margin. In this case, we must choose a new index which has an historical movement substantially similar to that of the original index. Also, any new index and margin that we select would have to result in an annual percentage rate substantially similar to the rate in effect at the time the original index became unavailable.

(d) Beginning with the 13th complete Billing Cycle, any increase in the annual percentage rate at the start of a Billing Cycle will cause the daily periodic rate and the amount of the interest for that Billing Cycle to increase starting as of the first day of the Billing Cycle. Beginning with the 13th complete Billing Cycle, any increase in the amount of the interest may cause your minimum payment to increase.

(e) In no case, however, during the term of this Agreement, will the "ANNUAL PERCENTAGE RATE" on your Account increase above 18%. This is called a "lifetime cap."

(f) Beginning with the 13th complete Billing Cycle, any decrease in the annual percentage rate at the start of a Billing Cycle will cause the interest for that Billing Cycle to decrease. Beginning with the 13th complete Billing Cycle, a decrease in the interest may cause your minimum payment to decrease accordingly.

(6) **DAILY BALANCE.** We figure the Finance Charge consisting of interest for the Billing Cycle by applying the daily periodic rate to the Daily Balances of your Account (excluding current transactions). To get the Daily Balance for each day, we take the beginning balance of your Account each day, add any new Loan Advances, and subtract any payments and credits. This gives us the Daily Balance. Then we add up all the Daily Balances for the Billing Cycle and apply the daily periodic rate to this sum. This gives us the Finance Charge consisting of interest for the entire Billing Cycle.

(7) **MINIMUM PAYMENT.** You must make a payment each month. We will send you bills for your monthly Billing Cycles. We will show on each bill the amount of your minimum payment for that monthly bill ("Minimum Payment") and the date when the Minimum Payment is due.

For each Billing Cycle during the term of this Agreement, you agree to pay a Minimum Payment equal

to the greater of (a) 2% of the New Balance shown on the bill, or (b) the sum of accrued but unpaid interest and Fees shown on the bill plus \$100. (This is called the "Current Minimum Payment.") If the New Balance is less than \$100, the Current Minimum Payment will equal the New Balance itself.

Paying only the Minimum Payment may not be sufficient to fully repay the outstanding loan balance by the Final Maturity Date. You will then be required to pay the entire balance unpaid at that time in a single lump sum payment.

Your Minimum Payment will also include any Minimum Payments from prior Billing Cycle(s) which have not yet been paid.

(8) **FINAL MATURITY DATE.** This Agreement will end on the date shown on the top of Page 1 as the "Final Maturity Date." This is the final maturity of all debts owed under the Agreement. All amounts not otherwise paid are due and payable on that date in a single lump sum payment.

(9) **FEES IMPOSED DURING THE LIFE OF THE ACCOUNT.** You agree to pay the following Fees.

(a) **Late Payment Fee.** If we do not receive the full amount of your Current Minimum Payment within 10 days from the date the payment is due as shown on your bill, we may charge you a late payment fee of 5% of your Current Minimum Payment, or \$25.00, whichever is greater.

(b) **Return Check Fee.** If a check you use to make payment on your Account (not a Loan Check) is returned unpaid, we may charge you a fee in the amount of \$ 5.00.

(c) **Membership Fee.** You agree to pay an annual membership fee. The fee will be billed to your Account on or after the 12th complete Billing Cycle and on or after each 12th complete Billing Cycle after that. The amount of the membership fee is \$35.00.

(d) **Credit Life and Disability Insurance.** We do not require that you obtain this insurance. If it is available, you will need to fill out a separate form and application.

(10) **MORTGAGE AND OTHER RIGHTS.** This Agreement is secured by a Mortgage ("Mortgage") on residential real estate including structures located at 24 RAWSON RD 367 SAGE HILL RD

JAMAICA, VT JAMAICA VT
(the "Property"). Whether or not you are the owner of the Property, you specifically agree to see that the following provisions are met to protect our security in the Property.

(a) **Property Insurance.** You agree that the Property will remain insured against loss by fire, such perils included within a broad form of an "all risk" (which are not otherwise excluded) type of insurance coverage generally available to homeowners and such other perils as we may specifically require (such as flood insurance, if applicable.)

You agree to provide such insurance in the amounts that we require. You can get this required insurance (including any required flood insurance)

from anyone you want, if we approve them. We may withhold approval only for reasonable cause. You cannot buy this property insurance through us.

(b) Maintenance of the Property. You agree that the Property will be kept in good condition and repair, used only as a primary residence or vacation home and not used for any illegal purpose.

(c) Prior Mortgages. You agree that any mortgage which has priority over our Mortgage (such as a first mortgage) must be kept up to date and not in default. You agree that you will not allow any new lien or mortgage to be placed on the Property without our written consent.

(d) Taxes and Other Charges. You agree that all taxes and other charges which might create a lien against the Property (including, where applicable, condominium or association charges) will be timely paid.

(e) Sale or Transfer of the Property. You agree that unless our prior written consent is given, the Property will not be sold or transferred while this Agreement remains in effect.

(f) Actions Necessary to Preserve Our Security in the Property. You must take all other actions reasonably necessary to preserve our security in the Property.

If any of these provisions are not met because of action or inaction of yours, and if such action or inaction by you adversely affects our security in the Property or any rights of ours in the Property, this action or inaction will be an Event of Default. We can then, unless prohibited by law, declare the full amount owing under this Agreement to be due and payable at once (see Section 11.7(c)).

(11) TAX IMPLICATIONS. You should consult a tax advisor regarding the deductibility of interest, charges and fees under this Agreement.

(12) BILLING ERRORS. Your rights and responsibilities with regard to billing errors are explained at the end of this Agreement under the heading: "YOUR BILLING RIGHTS."

III. PROMISE TO PAY AND TO FOLLOW THIS AGREEMENT.

(1) YOUR RIGHT TO BORROW AND YOUR DUTY TO REPAY. You have applied for and we have granted to you the right to borrow money under this Agreement. After signing this Agreement, if the Property is a principal dwelling, there will be a 3 business day period in which to cancel as explained in the "Notice of Right to Cancel".

After we are satisfied that there has been no cancellation during this period, you can each borrow money by writing Loan Checks up to your credit limit. No matter which of you writes one or more Loan Checks, each of you will be responsible for paying back all money loaned under this Agreement. Your ability to borrow will end at the Final Maturity Date.

As long as we have not accelerated, you must repay by making at least the Minimum Payments during the term of this Agreement. We will continue to charge you interest in the manner described above in Sections 11.4) and (5) until all of the principal is

fully paid, whether before or after maturity, by acceleration or otherwise.

You also agree to follow all the terms of this Agreement.

(2) AMOUNT SECURED BY MORTGAGE.

The Mortgage is being provided to secure all amounts due under this Agreement. If, however, it becomes necessary for us to extend credit above your credit limit because of the accrual of charges or for any other reason, any such amount above your credit limit will be owed by you to us but will not be secured by the Mortgage.

(3) USE OF LOAN CHECKS.

Loan Checks must be used primarily for personal, family or household purposes. Each Loan Check must be for at least \$500.00. Loan Checks should only be used so that the outstanding balance under the Plan does not exceed your credit limit.

You agree not to use a Loan Check to pay the interest or any other amount you owe us under this Agreement.

(4) LOAN ADVANCES.

When we receive a Loan Check, you authorize and direct us to pay it by lending to you the amount of the Loan Check. You agree that we may hold a Loan Check for the time allowed by law, if we think it advisable, until we can be sure that you wrote it.

(5) REFUSAL TO HONOR.

Our Loan Advances are not discretionary. We can refuse to "honor" a proper Loan Check only if an Event of Default has occurred or you or we have suspended or canceled use of the Plan as provided below, or if the proper Loan Check would cause you to go over your credit limit. Otherwise, we must "honor" the proper Loan Check by making a Loan Advance.

(B) PREPAYMENT

(a) Prepayment Charge. This Agreement is not intended for short term credit. We incur certain expenses in setting up the Account. You agree that your present intention, absent unforeseen circumstances, is to use this Account for a least 36 billing cycles. If you prepay your Account balance full, your account is terminated, and you request a release of the Mortgage, during the following periods, we will charge you, and you agree to pay (as an "other charge") a prepayment charge equal to the following percentages of the Maximum Credit Limit or dollar amount as indicated:

First 12 complete billing cycles [] — % [X] \$ 500.00
Next 12 complete billing cycles [] — % [X] \$ 250.00
Next 12 complete billing cycles [] — % [X] \$ 50.00

This charge will be due and payable before we will release the Mortgage.

(b) Right to Repay.

During the Draw Period, any amount you prepay (as long as you do not trigger the provisions of Subsection 6(a) above) will then be available to you to reborrow up to your Maximum Credit Limit. Unless you trigger the provisions of Subsection 6(a) above, if you reduce your Account balance to zero (0), but your Account is not terminated, we can keep the Account open for future Loan Advances during the Draw Period and the Mortgage will remain in effect as security for all Loan Advances until all amounts you owe are paid.

(7) **ACCELERATION.** We can declare you to be in default, terminate the Plan and require immediate repayment of the entire outstanding balance of your Account and any other amounts owing under this Agreement in a single payment ("accelerate") in any one of the following events (called "Events of Default"):

(a) We can do this if there is fraud or a material misrepresentation by you in connection with the Account.

(b) We can do this if you fail to meet repayment terms of this Agreement for any outstanding balance. (If we have charged points as provided in Section II.(1) above, a failure to make a payment will not be an Event of Default unless the payment has remained unpaid for more than 61 days after such payment was due.)

(c) We can do this if your action or inaction adversely affects our security in the Property or any right of ours in the Property.

If we do accelerate and bring a lawsuit to collect, you agree to pay our court costs and reasonable attorneys fees, as allowed by law. We will only accelerate if allowed by this Agreement and by law. If we decide to accelerate, we can do so without advance notice to you.

(8) **SUSPEND YOUR USE OF THE PLAN OR REDUCE YOUR CREDIT LIMIT.** We can suspend use of the Plan and stop further Loan Advances to you or we can reduce your credit limit during any period set forth below.

(a) We can do this during any period during which the value of the Property declines significantly below the appraised value used for purposes of the Plan.

(b) We can do this during any period when we reasonably believe you will be unable to fulfill the repayment obligations under this Agreement because of a material change in your financial circumstances.

(c) We can do this during any period when you are in default of any "material" obligation under this Agreement. "Material" obligations (i) include those obligations pertaining to payments due (set forth in Section II.(7) above), and protection of our security interest in the Property (set forth in Section II.(10) above), and not selling or allowing other mortgages or liens on the Property (set forth in Section IV.(2) below), and not moving out or renting the Property for more than 10 months of the year (set forth in Section IV.(3) below); and (ii) may include other provisions which are important to us.

(d) We can do this during any period when we are prevented by governmental action from imposing the annual percentage rate provided for in this Agreement.

(e) We can do this during any period when the priority of our Mortgage is hurt by governmental action to the extent that the value of our interest in the Property is less than 120% of the credit limit.

(f) We can do this during any period when we are notified by our regulatory agency that continued Loan Advances would constitute an unsafe and unsound practice.

(g) We can do this during any period when the interest rate being charged on your Account would equal or exceed the annual percentage rate "lifetime cap" described in subsection II.(5)(e) above.

(h) We can do this during any period when an Event of Default is occurring.

If we decide to suspend the Plan or reduce your credit limit, we can do so without advance notice to you, but we will notify all of you (and any Other Owner signing below) in writing, within 3 business days after the action is taken.

(9) **CHANGE IN TERMS.** We can change the terms of this Agreement upon 15 days notice (a) if the change will unequivocally benefit you throughout the remainder of this Agreement, or (b) if it is an "insignificant change in terms" as permitted by applicable law. (For example, we can alter Billing Cycles by providing 15 days advance notice.) We will make any determinations with regard to (a) and (b) above in the reasonable exercise of our discretion.

We can also change terms if otherwise allowed by applicable law or if you consent to such change in writing.

(10) **YOUR RIGHT TO STOP FUTURE ADVANCES.**

Any one of you can direct us not to make future Loan Advances by providing us with written notice at Chelsea Groton Savings Bank, 1 Franklin Square, Norwich, Connecticut 06360-0151, Attention: Installment Loan Manager. Unless the law provides an earlier effective date for the notice, your request will not be binding on us until we have had a reasonable opportunity to act upon your request (but no later than 2 business days after we receive your notice.)

(If that same person who gives us the written notice subsequently requests reinstatement in writing, we will honor such a request, unless an event set forth in Section III.(7) or III.(8) permits us to accelerate or suspend use of the Plan. Your request for reinstatement must be mailed or delivered to Chelsea Groton Savings Bank, 1 Franklin Square, Norwich, Connecticut 06360-0151, and directed to the Attention of Installment Loan Manager.)

IV. **OTHER PROVISIONS OF THIS AGREEMENT.**

(1) **CURRENT FINANCIAL INFORMATION.** You agree to give us your current financial information when we ask for it and to tell us promptly if your financial condition changes for the worse at any time.

(2) **SALE OR ENCUMBRANCE OF PROPERTY.** Except where otherwise allowed by law, without our written consent, the Property should not be used as security for any other debt and should be kept free of liens other than those of record on the Date of this Agreement.

Also, the amount of other debt which is secured by the Property as of the Date of this Agreement should not be increased beyond the amount owing on the Date of this Agreement.

You also agree to tell us at least 10 days in advance if the Property is scheduled to be sold so that, except where prohibited by law, we can arrange to have your Account paid off at the sale. After the sale, your right to use the Plan will be canceled.

Also, if you want to obtain a release in advance of the proposed sale (in section) you must make arrangements with us to suspend the Account, account for all Loan Checks, return all unused Loan Checks and sign whatever documents we reasonably require.

(3) USE OF THE PROPERTY. Except where otherwise allowed by law, you agree that while this Agreement is in place, the Property will be used as either a primary residence or a vacation or summer home. This means that, while this Agreement is in force, at least one of you or an Other Owner signing below will use the Property as a principal residence (if it is a principal residence) and that you will not rent the Property for more than 10 months of the year (if it is a vacation or summer home.)

(4) OUR WAIVERS. We have by law the right of "set off." This is a right to take or "set off" certain funds in deposit account(s) you have with us, to pay off what you owe under this Agreement. Under other agreements with you, we may also have rights of set off. In connection with this Agreement, we are giving up ("waiving") any of those rights and we will assert only the "set off" rights given to us by law.

(5) OUR DELAY IN ENFORCEMENT. We can delay in using any of our rights under this Agreement without losing them. Even if we do not use our rights at any one time, we may use them at a later time.

(6) EACH OF YOU WHO SIGNS IS LIABLE. If you are signing this Agreement with any other person or persons, each of you is obliged to pay the entire amount owing under this Agreement. Among other provisions, as long as the Plan is in place, when any of you sign a Loan Check, you sign for yourself and for the other(s) of you.

If any of you stop your right to future use of the Plan by taking the steps described in paragraph III.(10), we will stop the Plan for all of you, but all of you remain obligated to pay all amounts due under this Agreement.

We may require any of you to pay any amount without asking any other(s) of you to pay. We do not have to notify you that the amounts due under this Agreement have not been paid by any other(s) of you.

We and any of you can repeatedly agree to extend this Agreement for as long as we want, release any of the collateral or release anyone from liability under this Agreement, without notifying any other(s) of you or releasing any other(s) of you from your responsibility under this Agreement. In other words, the obligation of each of you is absolute and not conditioned on anything.

(7) NO CERTIFICATIONS OF LOAN CHECKS ALLOWED. You may not require us to certify a Loan Check, except if we are required to do so by law.

(8) NO STOP PAYMENT. We will not stop payment on any Loan Check. You understand that the Loan Checks must be used cautiously because you have no right to stop payment of a Loan Check.

(9) ASSIGNMENT. Chelsea Groton Savings Bank can assign any and all of its rights under this Agreement. You, however, may not assign any or all of your rights and duties under this Agreement without our express written consent.

(10) LOST OR STOLEN LOAN CHECKS. You agree to call the telephone number shown on your bill immediately if you learn that any of your Loan Checks are lost or stolen. Unless otherwise provided by law, you agree that we will not be liable for the unauthorized use of your Loan Checks as long as we have acted with good faith and ordinary care.

You must use a high degree of care in keeping and using your Loan Check.

(11) GOVERNING LAW AND ENFORCEABILITY. This Agreement will be governed by the laws of Connecticut and the Mortgage is governed by the laws of the state where the Property is located. If any part of this Agreement is found to be invalid, illegal or unenforceable by a court of agency, the other parts of this Agreement will stay valid and enforceable and will be read as if the invalid part had not been included.

(12) COPY. You each acknowledge getting a separate copy of this Agreement on the Date of this Agreement shown at the top of page 1. If you are not an owner of the Property, you also acknowledge getting a copy of the Mortgage.

Finally, you acknowledge getting (when you received an application for the Account), a copy of the disclosure entitled "Important Terms of our Home Equity Line of Credit Program" and the brochure entitled "When Your Home is on the Line: What You Should Know about Home Equity Lines of Credit".

This Agreement, the Mortgage, the brochure and that separate disclosure contain important information, so please review them carefully and keep them for your records.

(13) QUESTIONS. If you have any questions about this Agreement, please write to us at Chelsea Groton Savings Bank, 1 Franklin Square, Norwich, Connecticut 06360-0151, Attention: Loan Servicing Manager. (Calling us will not preserve your rights to dispute billing errors.) (See the last page of this Agreement for your billing rights and our responsibilities under law with regard to billing errors.)

(14) GOOD FAITH. Any determinations or judgments made by us in interpreting this Agreement will be made in good faith and in the reasonable exercise of our discretion.

(15) TERMINATE THE ACCOUNT. If all of you wish to terminate the Account, let us know. Before we will release the Mortgage, you must have paid all amounts owing, account for all Loan Checks and sign whatever documents we reasonably require.

1. Robert R. Simmons
ROBERT R. SIMMONS
Signature to Note and Loan Agreement

2. _____
Signature to Note and Loan Agreement

3. _____
Signature to Note and Loan Agreement

OTHERS OWNER(S)
Each of those signing below has an ownership interest in the Property but is not authorized to borrow under this Agreement. Each of those signing below is not directly, personally obligated to repay the amounts due under this Agreement, but is giving a mortgage on the Property to secure that indebtedness. Each of those signing below understands that he/she could lose the Property if the obligations under the Agreement are not met. Each of those signing below acknowledges receiving one copy of this entire document as a disclosure of its terms.

Signature of Other Owner

Signature of Other Owner

YOUR BILLING RIGHTS

KEEP THIS NOTICE FOR FUTURE USE

This notice contains important information about your rights and our responsibilities under the applicable Fair Credit Billing laws.

Notify Us in Case of Errors or Questions About Your Bill

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us on a separate sheet at Chelsea Groton Savings Bank, 1 Franklin Square, Norwich, Connecticut 06260-0151, Attention: Loan Servicing Manager. Write to us as soon as possible. We must hear from you no later than 60 days after we sent you the first bill on which the error or problem appeared. You can telephone us, but doing so will not preserve your rights.

In your letter, give us the following information:

- Your name and account number.
- The dollar amount of the suspected error.
- Describe the error and explain, if you can, why you believe there is an error. If you need more information, describe the item you are not sure about.

Your Rights and Our Responsibilities After We Receive Your Written Notice

We must acknowledge your letter within 30 days, unless we have corrected the error by then. Within 90 days, we must either correct the error or explain why we believe the bill was correct.

After we receive your letter, we cannot try to collect any amount you question, or report you as delinquent. We can continue to bill you for the amount you question, including Finance Charges consisting of interest, and we can apply any unpaid amount against your credit limit. You do not have to pay any questioned amount while we are investigating, but you are still obligated to pay the parts of your bill that are not in question.

If we find that we made a mistake on your bill, you will not have to pay any Finance Charges consisting of interest related to any questioned amount. If we didn't make a mistake, you may have to pay Finance Charges consisting of interest, and you will have to make up any missed payments on the questioned amount. In either case, we will send you a statement of the amount you owe and the date that it is due.

If you fail to pay the amount that we think you owe, we may report you as delinquent. However, if our explanation does not satisfy you and you write to us within 10 days telling us that you still refuse to pay, we must tell anyone we report you to that you have a question about your bill. And, we must tell you the name of anyone we reported you to. We must tell anyone we report you to that the matter has been settled between us when it finally is.

If we don't follow these rules, we can't collect the first \$50 of the questioned amount, even if your bill was correct.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered	Date of Receipt
☐ First Class Mail	POSTMARKED
☒ Registered/Certified Mail	POSTMARKED (R/C) 12-6-00
☐ No Postmark	
☐ Postmark Illegible	
☐ Received from the House office of Records and Registration	Date of Receipt
☐ Received from the Senate Office of Public Records	Date of Receipt
☐ Other (Specify):	Postmarked and/or Date of Receipt
☐ Electronic Filing	
JM 13 PREPARER	12-10-00 DATE PREPARED