

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

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

Committee to Elect Chris Murphy

ADDRESS (number and street) P.O. Box 127

Check if different than previously reported. (ACC)

Cheshire CT 06410

2. **FEC IDENTIFICATION NUMBER** C00411660

CITY STATE ZIP CODE STATE DISTRICT

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

CT 05

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

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

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

Convention (12C) Special (12S)

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

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

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

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

5. Covering Period 01 01 2009 through 03 31 2009

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 Kathy Altobello

Signature of Treasurer Electronically Filed by Kathy Altobello Date 04 15 2009

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Committee to Elect Chris Murphy

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	393127.66	399179.68
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	250.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	393127.66	398929.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	67054.28	183187.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	8085.10	8305.88
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	58969.18	174881.82
8. Cash on Hand at Close of Reporting Period (from Line 27).....	386039.00	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Committee to Elect Chris Murphy

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

301032.46

304532.46

(ii) Unitemized.....

5565.00

5867.02

(iii) TOTAL of contributions

306597.46

310399.48

from individuals..... ▶

30.20

30.20

(b) Political Party Committees.....

86500.00

88750.00

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS (other than loans)

393127.66

399179.68

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

0.00

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

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

8085.10

8305.88

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

0.00

0.00

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

401212.76

407485.56

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67054.28	183187.70
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	250.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	250.00
21. OTHER DISBURSEMENTS.....	23000.00	23100.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	90054.28	206537.70

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	74880.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	401212.76
25. SUBTOTAL (add Line 23 and Line 24).....	476093.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	90054.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	386039.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 131
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
R. Scott Asen

Mailing Address 36 Tobey Hill Rd.

City State Zip Code
Canaan CT 06018

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

Name of Employer: Asen and Co. (self-employed)
Occupation: Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: C3278777

Amount of Each Receipt this Period: 2400.00

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

B.

Full Name (Last, First, Middle Initial)
R. Scott Asen

Mailing Address 36 Tobey Hill Rd.

City State Zip Code
Canaan CT 06018

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

Name of Employer: Asen and Co. (self-employed)
Occupation: Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 03 / 11 / 2009
Transaction ID: C3278653

Amount of Each Receipt this Period: 2400.00

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

C.

Full Name (Last, First, Middle Initial)
Martha L. Baer

Mailing Address 165 Interlaken Road

City State Zip Code
Lakeville CT 06039

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

Name of Employer: Christies
Occupation: Art Specialist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt: 03 / 26 / 2009
Transaction ID: C3318086

Amount of Each Receipt this Period: 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial) Martha L. Baer		Date of Receipt MM / DD / YYYY 03 / 30 / 2009
Mailing Address 165 Interlaken Road		Transaction ID: C3426040
City Lakeville	State CT	Zip Code 06039
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer Christies	Occupation Art Specialist	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

B.

Full Name (Last, First, Middle Initial) Bill Grandin Bardel		Date of Receipt MM / DD / YYYY 03 / 24 / 2009
Mailing Address 166 Baldwin Hill Rd.		Transaction ID: C3308677
City Washington Depot	State CT	Zip Code 06794
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer The Lawrenceville School	Occupation CFO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

C.

Full Name (Last, First, Middle Initial) Bruce A. Barrett		Date of Receipt MM / DD / YYYY 03 / 30 / 2009
Mailing Address 381 Highland Street		Transaction ID: C3426003
City West Haven	State CT	Zip Code 06516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Barrett Outdoor Communica- tions	Occupation CFO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	6400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Ward Belcher

Mailing Address 1 Town Hill Rd.

City Lakeville State CT Zip Code 06039

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

Name of Employer Town Hill Farm Occupation General Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 25 / 2009

Transaction ID: C3317865

Amount of Each Receipt this Period 2400.00

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

B.

Full Name (Last, First, Middle Initial)
Ward Belcher

Mailing Address 1 Town Hill Rd.

City Lakeville State CT Zip Code 06039

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

Name of Employer Town Hill Farm Occupation General Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 25 / 2009

Transaction ID: C3317866

Amount of Each Receipt this Period 2400.00

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

C.

Full Name (Last, First, Middle Initial)
April Ann Benasich

Mailing Address 451 W End Ave Apt 9D

City New York State NY Zip Code 10024-5363

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

Name of Employer self Occupation research scientist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 31 / 2009

Transaction ID: C3495102

Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
April Ann Benasich

Mailing Address 451 W End Ave
Apt 9D

City State Zip Code
New York NY 10024-5363

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation
research scientist

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

4800.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: C3495101

Amount of Each Receipt this Period
2400.00

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

B.

Full Name (Last, First, Middle Initial)
Richard S Berzine

Mailing Address P.O. Box 223

City State Zip Code
Falls Village CT 06031

FEC ID number of contributing federal political committee. C

Name of Employer Richard Berzine & Company Ltd Occupation
Commercial Real Estate Advisor

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2300.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417290

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
Matthew Berzok

Mailing Address 4824 Earlston Dr.

City State Zip Code
Bethesda MD 20816

FEC ID number of contributing federal political committee. C

Name of Employer Ryan, MacKinnon, Vasapoli and Berzok, Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425868

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) 5700.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Michael Bisceglia

Mailing Address 39 Augur Lane

City State Zip Code
Durham CT 06422

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

Name of Employer Occupation
Midstate Radiology Associates Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3433919

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
O Joseph Bizzozero, Jr. M. D.

Mailing Address 51 Curtis Farms Road

City State Zip Code
Middlebury CT 06762

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

Name of Employer Occupation
Alliance Medical Group Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3426034

Amount of Each Receipt this Period
250.00

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

C.

Full Name (Last, First, Middle Initial)
Barbara Blanco

Mailing Address 8 Pheasant Ridge Road

City State Zip Code
Newtown CT 06470

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

Name of Employer Occupation
Ridgefield Diagnostic Imaging Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: C3417203

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) Andrew E Bloch</p> <p>Mailing Address 8941 Diamond Falls Dr</p> <p>City State Zip Code Las Vegas NV 89117</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer self Occupation Professional Poker Player</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">1200.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2009</p> <p>Transaction ID: C3417140</p> <p>Amount of Each Receipt this Period 1200.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Francisco L. Borges</p> <p>Mailing Address 2 Northington Way</p> <p>City State Zip Code Farmington CT 06032</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Landmark Partners Inc. Occupation Chairman</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2009</p> <p>Transaction ID: C3278783</p> <p>Amount of Each Receipt this Period 2400.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>C. Full Name (Last, First, Middle Initial) Francisco L. Borges</p> <p>Mailing Address 2 Northington Way</p> <p>City State Zip Code Farmington CT 06032</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Landmark Partners Inc. Occupation Chairman</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right; margin-right: 50px;">4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 03 / 11 / 2009</p> <p>Transaction ID: C3278781</p> <p>Amount of Each Receipt this Period 2400.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	6000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Sherwin Borsuk, MD
Mailing Address 80 Parker Ave
City Meriden State CT Zip Code 06450
FEC ID number of contributing federal political committee. **C**
Name of Employer Midstate Radiology Occupation Radiology
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 03 / 13 / 2009
Transaction ID: C3417241
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
John Brady
Mailing Address 110 Barnes Road
City Wallingford State CT Zip Code 06492
FEC ID number of contributing federal political committee. **C**
Name of Employer CHA Occupation CFO, VP Business Planning
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C3425886
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James Brink
Mailing Address 13 Wheatstone Road
City Madison State CT Zip Code 06443
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 03 / 31 / 2009
Transaction ID: C3495107
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **750.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
John W. Burkhart

Mailing Address PO Box 1777
140 Millerton Rd.

City Lakeville State CT Zip Code 06039-1777

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 900.00

Date of Receipt: 03 / 28 / 2009
Transaction ID: C3417571
Amount of Each Receipt this Period: 900.00

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

B.

Full Name (Last, First, Middle Initial)
sandra e canning

Mailing Address 119 calhon st

City washington depot State CT Zip Code 06794

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

Name of Employer self Occupation journalist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: C3418754
Amount of Each Receipt this Period: 500.00

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

C.

Full Name (Last, First, Middle Initial)
James W. Carroll

Mailing Address 75 Ridgwood Ave

City North Haven State CT Zip Code 06473

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

Name of Employer Midstate Radiology Associates Occupation Radiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 13 / 2009
Transaction ID: C3433905
Amount of Each Receipt this Period: 250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **1650.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Mary Hopkins Casden
 Mailing Address 50 Sugar Lane
 City Newtown State CT Zip Code 06470
 Date of Receipt 03 / 30 / 2009
Transaction ID: C3418139
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation attorney
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard Stephen Casden
 Mailing Address 50 Sugar Lane
 City Newtown State CT Zip Code 06470
 Date of Receipt 03 / 30 / 2009
Transaction ID: C3418135
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer self Occupation physician
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stewart Michael Casper, Esq.
 Mailing Address 72 Seir Hill Rd.
 City Wilton State CT Zip Code 06897
 Date of Receipt 03 / 28 / 2009
Transaction ID: C3417533
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Casper & de Toledo LLC Occupation lawyer
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Rita Chakalos		Date of Receipt
	Mailing Address 52 Overlook Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Windsor	CT	06095
	FEC ID number of contributing federal political committee. C		Transaction ID: C3425963
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Jane Deane Clark		Date of Receipt
	Mailing Address CHA, PO Box 90 110 Barnes Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Wallingford	CT	06492
	FEC ID number of contributing federal political committee. C		Transaction ID: C3425884
Name of Employer CHA		Occupation VP, Data Services	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Joseph Connolly		Date of Receipt
	Mailing Address 32 Independence Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 30 / 2009
	City	State	Zip Code
	Middlebury	CT	06762
	FEC ID number of contributing federal political committee. C		Transaction ID: C3425887
Name of Employer St. Mary's Hospital		Occupation Director of Marketing and Community Re	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Jennifer Cox
 Mailing Address 28 Coginchaug Court
 City Guilford State CT Zip Code 06437
 Date of Receipt 03 / 30 / 2009
 Transaction ID: C3425896
 Amount of Each Receipt this Period 250.00
 FEC ID number of contributing federal political committee. C
 Name of Employer Cox & Osowiecki Occupation Attorney
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Jane Curtin
 Mailing Address P.O. Box 1070
181 Mudge Pond Rd
 City Sharon State CT Zip Code 06069
 Date of Receipt 03 / 11 / 2009
 Transaction ID: C3278779
 Amount of Each Receipt this Period 2400.00
 FEC ID number of contributing federal political committee. C
 Name of Employer JTC Enterprises, Ltd Occupation Actress
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Christopher Dadlez
 Mailing Address 9 Cobtail Way
 City Simsbury State CT Zip Code 06070
 Date of Receipt 03 / 30 / 2009
 Transaction ID: C3425891
 Amount of Each Receipt this Period 500.00
 FEC ID number of contributing federal political committee. C
 Name of Employer St. Francis Hospital & Medical Center Occupation President & CEO
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3150.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 16 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Paul Edward Dassenko

Mailing Address 79 Mudge Pond Road
PO Box 245

City Sharon State CT Zip Code 06069-0245

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

Name of Employer AzuRe Advisors, Inc. Occupation Consultant to the Insurance Industry

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 28 / 2009
Transaction ID: C3417143
 Amount of Each Receipt this Period 2400.00

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

B. Full Name (Last, First, Middle Initial)
Paul Edward Dassenko

Mailing Address 79 Mudge Pond Road
PO Box 245

City Sharon State CT Zip Code 06069-0245

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

Name of Employer AzuRe Advisors, Inc. Occupation Consultant to the Insurance Industry

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 28 / 2009
Transaction ID: C3433779
 Amount of Each Receipt this Period 2400.00

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

C. Full Name (Last, First, Middle Initial)
Lea Purdum Davies

Mailing Address 498 Cornwall Bridge Road

City Sharon State CT Zip Code 06069

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

Name of Employer Retired Occupation Verizon

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 19 / 2009
Transaction ID: C3283881
 Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► 7200.00

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

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

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

FOR LINE NUMBER: PAGE 17 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Gary Dee, MD
Mailing Address 383 Beacon Hill Drive
City Cheshire State CT Zip Code 06410
FEC ID number of contributing federal political committee. **C**
Name of Employer MidState Radiology Associates Occupation Radiologist, Medical Doctor
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 13 / 2009
Transaction ID: C3417224
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Angelo Defazio, Rph PD
Mailing Address 120 Indian Hill Rd
City Canton State CT Zip Code 06019
FEC ID number of contributing federal political committee. **C**
Name of Employer ANG Inc Occupation Pres/CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 31 / 2009
Transaction ID: C3495115
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Angelo Defazio, Rph PD
Mailing Address 120 Indian Hill Rd
City Canton State CT Zip Code 06019
FEC ID number of contributing federal political committee. **C**
Name of Employer ANG Inc Occupation Pres/CEO
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 31 / 2009
Transaction ID: C3495116
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ **5050.00**
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 120 Indian Hill Rd

City State Zip Code
canton CT 06019

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

Name of Employer self Occupation
self business consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3495113

Amount of Each Receipt this Period
2400.00

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

4800.00

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

Mailing Address 120 Indian Hill Rd

City State Zip Code
canton CT 06019

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

Name of Employer self Occupation
self business consultant

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3495112

Amount of Each Receipt this Period
2400.00

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

4800.00

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

Mailing Address 234 Green Hill Rd.

City State Zip Code
Madison CT 06443

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

Name of Employer self Occupation
Mid State Radiology Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3433923

Amount of Each Receipt this Period
250.00

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

250.00

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 30 Naser Road
PO Box 1527

City Litchfield State CT Zip Code 06759

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

Name of Employer News Corporation Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 28 / 2009
Transaction ID: C3417154
 Amount of Each Receipt this Period 2400.00

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

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

Mailing Address 30 Naser Road
PO Box 1527

City Litchfield State CT Zip Code 06759

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

Name of Employer News Corporation Occupation Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 28 / 2009
Transaction ID: C3433774
 Amount of Each Receipt this Period 2400.00

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

C. Full Name (Last, First, Middle Initial)
Paul W. Douglas

Mailing Address 68 Painter Ridge Rd
P.O. Box 1062

City Washington State CT Zip Code 06793

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

Name of Employer none Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 03 / 29 / 2009
Transaction ID: C3417649
 Amount of Each Receipt this Period 1250.00

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

SUBTOTAL of Receipts This Page (optional) ► **6050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Peter Dreyer

Mailing Address 150 East 44th St. #35G

City State Zip Code
New York NY 10017

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

Name of Employer Occupation
Silver Golub & Teitell Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425865

Amount of Each Receipt this Period
500.00

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

B.

Full Name (Last, First, Middle Initial)
Philippa Durrant

Mailing Address P.O. Box 96

City State Zip Code
Cornwall Bridge CT 06754

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

Name of Employer Occupation
Self-Employed Sales/Marketing

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2009

Transaction ID: C3317749

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Jay Duxin

Mailing Address 18 James Court

City State Zip Code
Avon CT 06001

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

Name of Employer Occupation
Mandell & Blau, MD PC Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: C3417197

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 32 Saxon Woods

City Avon State CT Zip Code 06001

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

Name of Employer Edison Coatings Inc. Occupation Vice President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: C3495099
 Amount of Each Receipt this Period 2000.00

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

B. Full Name (Last, First, Middle Initial)
Joseph H. Ellis

Mailing Address 158 Town St

City West Cornwall State CT Zip Code 06753

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

Name of Employer None Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 18 / 2009
Transaction ID: C3282799
 Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
Priscilla Wear Ellsworth

Mailing Address P.O. Box 356
75 Main Street

City Salisbury State CT Zip Code 06068

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009
Transaction ID: C3432400
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 47 Old Long Ridge Road

City State Zip Code
Stamford CT 06903

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

Name of Employer Occupation
Emmett & Glander Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3418843

Amount of Each Receipt this Period
750.00

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

B. Full Name (Last, First, Middle Initial)
Linda A Fercodini

Mailing Address 19 Andrea Ave

City State Zip Code
Wolcott CT 06716-3207

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

Name of Employer Occupation
Fercodini Real Estate Real Estate Broker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3495130

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Mara Dana Fizdale

Mailing Address 56 Keeler Rd

City State Zip Code
Sharon CT 06069

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

Name of Employer Occupation
none retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 29 / 2009

Transaction ID: C3417677

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **3650.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Kenneth J. Floryan

Mailing Address 71 Penn Drive

City State Zip Code
West Hartford CT 06119-1153

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

Name of Employer Babson Capital Management Occupation Investment Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: C3278793

Amount of Each Receipt this Period
2400.00

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

B.

Full Name (Last, First, Middle Initial)
Kenneth J. Floryan

Mailing Address 71 Penn Drive

City State Zip Code
West Hartford CT 06119-1153

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

Name of Employer Babson Capital Management Occupation Investment Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID: C3278792

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
Brian J Foley

Mailing Address 76 Hartford Road

City State Zip Code
Simsbury CT 06070

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

Name of Employer Apple Health Care Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425964

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 131
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Vincent Frillici

Mailing Address 4617 Arkansas Ave NW

City Washington State DC Zip Code 20011-4444

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425864

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Tino T Galluzzo

Mailing Address PO Box 1306
226 Millerton Road

City Lakeville State CT Zip Code 06039-8306

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

Name of Employer Full House Productions Inc. Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417293

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
George Davis Gammon

Mailing Address 33 Edgehill Terrace

City Hamden State CT Zip Code 06517

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

Name of Employer Self Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417005

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
James Gatling
Mailing Address 102 Sabina Drive
City Southington State CT Zip Code 06489-2448
FEC ID number of contributing federal political committee. **C**
Name of Employer New Opportunities Waterbury, Inc Occupation President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 31 / 2009
Transaction ID: C3495108
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
William Glucksman
Mailing Address 50 Colony Road
City West Hartford State CT Zip Code 06117
FEC ID number of contributing federal political committee. **C**
Name of Employer Jefferson Radiology Occupation Physician
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 13 / 2009
Transaction ID: C3417223
Amount of Each Receipt this Period 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Steven A. Godfrey
Mailing Address 11 Round Hill Rd.
City Cheshire State CT Zip Code 06410
FEC ID number of contributing federal political committee. **C**
Name of Employer The Hospital of Central Connecticut Occupation Health Care Administration
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼
Date of Receipt 03 / 30 / 2009
Transaction ID: C3425872
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
david s golub

Mailing Address 47 old long ridge rd

City State Zip Code
stamford CT 06903

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

Name of Employer Occupation
silver golub & teitell llp attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3418858

Amount of Each Receipt this Period
750.00

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

B. Full Name (Last, First, Middle Initial)
Ann M Goodbody

Mailing Address 333 East 68th Street #3C

City State Zip Code
New York NY 10065

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

Name of Employer Occupation
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3426027

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
Micah S. Green

Mailing Address 10413 Democracy Ln

City State Zip Code
Potomac MD 20854-4037

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

Name of Employer Occupation
Patton Boggs Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425863

Amount of Each Receipt this Period
750.00

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

SUBTOTAL of Receipts This Page (optional) ► **3900.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Albert R. Gurney, Jr.
Mailing Address 40 Wellers Bridge Rd
City Roxbury State CT Zip Code 06783-1616
FEC ID number of contributing federal political committee. **C**
Name of Employer self Occupation writer
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 29 / 2009
Transaction ID: C3417645
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mary Gurney
Mailing Address 40 Weller's Bridge Road
City Roxbury State CT Zip Code 06783
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 29 / 2009
Transaction ID: C3417646
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Bruce D. Haims
Mailing Address 251 Painter Hill Road
City Roxbury State CT Zip Code 06783
FEC ID number of contributing federal political committee. **C**
Name of Employer Debevoise & Plimpton LLP Occupation Lawyer
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt 03 / 23 / 2009
Transaction ID: C3425930
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 3400.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Harry Hajedemos

Mailing Address 319 Beacon Hill Drive

City State Zip Code
Cheshire CT 06410

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

Name of Employer Occupation
Midstate Radiology Association Radiologist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	3	/	2	0	0	9

Transaction ID: C3417225

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Wendy B Hamilton

Mailing Address 209 Sharon Rd.
P.O. Box 720

City State Zip Code
Lakeville CT 06039

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

Name of Employer Occupation
Self Investments

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: C3417307

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
Wendy B Hamilton

Mailing Address 209 Sharon Rd.
P.O. Box 720

City State Zip Code
Lakeville CT 06039

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

Name of Employer Occupation
Self Investments

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	7	/	2	0	0	9

Transaction ID: C3417308

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Steven D. Hanks, MD

Mailing Address 9 Clear Brook

City Farmington State CT Zip Code 06032

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

Name of Employer Hospital of Central Connecticut Occupation Physician Executive

Receipt For: 2010 Election Cycle-to-Date

Primary General
 Other (specify) ▼

Date of Receipt: 03 / 30 / 2009
Transaction ID: C3425876
Amount of Each Receipt this Period: 500.00

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

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

Mailing Address 11 Stiles Court

City South Windsor State CT Zip Code 06074

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

Name of Employer Saint Francis Hospital Occupation Hospital Administrator

Receipt For: 2010 Election Cycle-to-Date

Primary General
 Other (specify) ▼

Date of Receipt: 03 / 30 / 2009
Transaction ID: C3425889
Amount of Each Receipt this Period: 250.00

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

C. Full Name (Last, First, Middle Initial)
Deborah R Hartnett

Mailing Address PO Box 1585
58 South Street

City Litchfield State CT Zip Code 06759

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2010 Election Cycle-to-Date

Primary General
 Other (specify) ▼

Date of Receipt: 03 / 27 / 2009
Transaction ID: C3417249
Amount of Each Receipt this Period: 2400.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **3150.00**

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

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

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

FOR LINE NUMBER: PAGE 30 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 49 Mountain Spring Rd

City Farmington State CT Zip Code 06032

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

Name of Employer Mutualink, Inc Occupation CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 31 / 2009
Transaction ID: C3418465
 Amount of Each Receipt this Period 2400.00

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

B. Full Name (Last, First, Middle Initial)
Debbie Phillips Hauser

Mailing Address 396 Livingston Street

City New Haven State CT Zip Code 06511

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

Name of Employer self-employed Occupation clinical psychologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009
Transaction ID: C3426047
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address PO Box 6184

City Wolcott State CT Zip Code 06716

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

Name of Employer Self-employed Occupation JHS Vending

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009
Transaction ID: C3425970
 Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 3900.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 27 Homewood Place

City State Zip Code
Wolcott CT 06716

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

Name of Employer Self-employed Occupation
JHS Vending

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425972

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
John A Herrmann

Mailing Address 1105 Park Ave # 1C

City State Zip Code
New York NY 10128-1200

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

Name of Employer Lincoln International Occupation
Investment Banker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3495100

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Michael L Herzig

Mailing Address 2787 Route 9

City State Zip Code
Cold Spring NY 10516

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

Name of Employer Locus Energy Occupation
Founder

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: C3279863

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial) Diane L-S Hewat		Date of Receipt MM / DD / YYYY 03 / 11 / 2009
Mailing Address 119 Selleck Hill Rd		Transaction ID: C3278651
City Salisbury	State CT	Zip Code 06068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

B.

Full Name (Last, First, Middle Initial) Diane L-S Hewat		Date of Receipt MM / DD / YYYY 03 / 11 / 2009
Mailing Address 119 Selleck Hill Rd		Transaction ID: C3278785
City Salisbury	State CT	Zip Code 06068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2200.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

C.

Full Name (Last, First, Middle Initial) Diane L-S Hewat		Date of Receipt MM / DD / YYYY 03 / 11 / 2009
Mailing Address 119 Selleck Hill Rd		Transaction ID: C3278786
City Salisbury	State CT	Zip Code 06068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00
Name of Employer retired	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4800.00	

SUBTOTAL of Receipts This Page (optional)	4800.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Donald E. Hewat

Mailing Address 119 Selleck Hill Rd.

City State Zip Code
Salisbury CT 06068

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

Name of Employer retired Occupation retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417285

Amount of Each Receipt this Period
2400.00

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

B. Full Name (Last, First, Middle Initial)
Donald E. Hewat

Mailing Address 119 Selleck Hill Rd.

City State Zip Code
Salisbury CT 06068

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

Name of Employer retired Occupation retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

4800.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417287

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
Tracy F Hewat

Mailing Address 23 Johnson Road

City State Zip Code
West Cornwall CT 06796

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

Name of Employer Self Employed Occupation Fundraiser

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: C3279870

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Stephen Holland
 Mailing Address 15 Beach Avenue
 City State Zip Code
 Watertown CT 06795
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 St. Mary's Hospital CMO
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3425878
 Amount of Each Receipt this Period
 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Kimberley Hostetler
 Mailing Address 31 Prospect Place
 City State Zip Code
 Bristol CT 06010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Connecticut Hospital Association Vice President
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3425882
 Amount of Each Receipt this Period
 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Peter Robert Howe
 Mailing Address 30 Naser Road
 City State Zip Code
 Litchfield CT 06759
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 self author
 Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 28 / 2009
Transaction ID: C3417153
 Amount of Each Receipt this Period
 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3150.00**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Peter Robert Howe

Mailing Address 30 Naser Road

City Litchfield State CT Zip Code 06759

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

Name of Employer self Occupation author

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 28 / 2009

Transaction ID: C3433776

Amount of Each Receipt this Period 2400.00

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

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

Mailing Address 114 Steep Hollow Lane

City Manchester State CT Zip Code 06040

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

Name of Employer CHA Occupation VP Government Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425897

Amount of Each Receipt this Period 250.00

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

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

Mailing Address 15 Jenda Way

City Madison State CT Zip Code 06443

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

Name of Employer Connecticut Hospital Association Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425895

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ► 2900.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 177 Sabbaday Ln

City Washington Depot State CT Zip Code 06794-1221

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

Name of Employer Lehman Brothers Occupation Investment Banker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 01 / 27 / 2009
Transaction ID: C3250779
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 12 North Beech Tree Road

City Brookfield State CT Zip Code 06804

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

Name of Employer Danbury Hospital Occupation Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2009
Transaction ID: C3417637
 Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 156 Millerton Rd.
P.O. Box 1188

City Sharon State CT Zip Code 06069

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 13 / 2009
Transaction ID: C3279871
 Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► 4400.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 156 Millerton Rd.
P.O. Box 1188

City Sharon State CT Zip Code 06069

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

Name of Employer retired Occupation retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 03 / 13 / 2009
Transaction ID: C3279872
 Amount of Each Receipt this Period: 2400.00

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

Amount of Each Receipt this Period: 4800.00

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

Mailing Address 96 W Mountain Rd

City West Simsbury State CT Zip Code 06092-2303

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

Name of Employer Self-Employed Occupation Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 03 / 30 / 2009
Transaction ID: C3426030
 Amount of Each Receipt this Period: 1000.00

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

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 156 Coventry Road

City Mansfield Center State CT Zip Code 06250-1651

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

Name of Employer Self Occupation Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt: 03 / 23 / 2009
Transaction ID: C3425928
 Amount of Each Receipt this Period: 2400.00

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

Amount of Each Receipt this Period: 2400.00

SUBTOTAL of Receipts This Page (optional) ► **5800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

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

Mailing Address PO Box 144

City State Zip Code
Bridgewater CT 06752-0144

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

Name of Employer Occupation
Danbury Hospital President

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425907

Amount of Each Receipt this Period

500.00

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

B.

Full Name (Last, First, Middle Initial)
Kevin Kelly

Mailing Address 7819 Montvale Way

City State Zip Code
McLean VA 22102

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

Name of Employer Occupation
Van Scoyoc Associates Lawyer/Lobbyist

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3416506

Amount of Each Receipt this Period

500.00

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

C.

Full Name (Last, First, Middle Initial)
anthony clarke kiser

Mailing Address 27 S Main St

City State Zip Code
Sharon CT 06069-2243

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

Name of Employer Occupation
william and mary greve foundation executive

Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: C3279500

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Carolyn Salsgiver Kobsa

Mailing Address 360 Thayer Pond Road

City State Zip Code
Wilton CT 06897

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

Name of Employer Occupation
Bridgeport Hospital Administrator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3495125

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 455 E. 86th St.

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 29 / 2009

Transaction ID: C3417643

Amount of Each Receipt this Period
2400.00

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

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

Mailing Address 455 E. 86th St.

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
MM / DD / YYYY
03 / 29 / 2009

Transaction ID: C3417644

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

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

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

FOR LINE NUMBER: PAGE 40 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 5644 Governors Pond Circle

City State Zip Code
Alexandria VA 22310

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

Name of Employer Ryan, MacKinnon, Vasapoli and Berzok, Occupation Partner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	0	9

Transaction ID: C3425867

Amount of Each Receipt this Period
500.00

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

B. Full Name (Last, First, Middle Initial)
Jay L Kriegel

Mailing Address 20 Howland Road

City State Zip Code
South Kent CT 06785

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

Name of Employer Related Co Occupation Senior Advisor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: C3425925

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
Jay L Kriegel

Mailing Address 20 Howland Road

City State Zip Code
South Kent CT 06785

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

Name of Employer Related Co Occupation Senior Advisor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: C3426106

Amount of Each Receipt this Period
100.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 41 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Scott H. Kurtzman
 Mailing Address 461 Rockwood Drive
 City State Zip Code
 Southington CT 06489
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3426036
 Amount of Each Receipt this Period
 250.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Waterbury Hospital Occupation Chairman of Surgery
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) 250.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Howard Lasser
 Mailing Address 116 Tower Road
 City State Zip Code
 Brookfield CT 06804-3653
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2009
Transaction ID: C3417283
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Carolee LLC Occupation Finance
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Thomas LaTorre
 Mailing Address 170 Boston Post Road, Suite 105
 City State Zip Code
 Madison CT 06443
 Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3425945
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Paragon Advisors Occupation Energy Broker
 Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 2250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Andrew J. Lawson

Mailing Address One Fox Den Way

City State Zip Code
Woodbridge CT 06525

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

Name of Employer
Diagnostic Radiology Associates
Occupation
Radiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Howard M. Lee

Mailing Address 18 Gideon Reynolds Road

City State Zip Code
Cross River NY 10518

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

Name of Employer
Northeast Radiology
Occupation
Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
Fa Liddell

Mailing Address 520 E. 86th St.

City State Zip Code
New York NY 10028

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

Name of Employer
not employed
Occupation
not employed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Amount of Each Receipt this Period
4800.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 520 E. 86th St.

City State Zip Code
New York NY 10028

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

Name of Employer not employed Occupation not employed

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 11 / 2009

Transaction ID: C3278775

Amount of Each Receipt this Period
2400.00

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

B. Full Name (Last, First, Middle Initial)
Stu L Longman

Mailing Address 424 West Mountain Road

City State Zip Code
Ridgefield CT 06877

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

Name of Employer Self Occupation Investment

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2009

Transaction ID: C3417713

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
Stu L Longman

Mailing Address 424 West Mountain Road

City State Zip Code
Ridgefield CT 06877

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

Name of Employer Self Occupation Investment

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2009

Transaction ID: C3433784

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Richard A. Lukins
Mailing Address 14 E. 39th St.
City State Zip Code
New York NY 10016
FEC ID number of contributing federal political committee. **C**
Name of Employer Advantage Security Occupation
Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009
Transaction ID: C3417279
Amount of Each Receipt this Period
100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Richard A. Lukins
Mailing Address 14 E. 39th St.
City State Zip Code
New York NY 10016
FEC ID number of contributing federal political committee. **C**
Name of Employer Advantage Security Occupation
Occupation President
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009
Transaction ID: C3417278
Amount of Each Receipt this Period
2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Patrick Lynch
Mailing Address 181 Mudge Pond Rd, P.O. Box 1070
City State Zip Code
Sharon CT 06069
FEC ID number of contributing federal political committee. **C**
Name of Employer JTC Enterprises LTD. Occupation
Occupation Producer
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00
Date of Receipt
M M / D D / Y Y Y Y Y
03 / 11 / 2009
Transaction ID: C3278780
Amount of Each Receipt this Period
2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 4900.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 45 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 115 Central Park W
Apt 18E

City State Zip Code
New York NY 10023-4198

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

Name of Employer Occupation
Arethusa Farm Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417244

Amount of Each Receipt this Period
2400.00

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

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

Mailing Address 115 Central Park W
Apt 18E

City State Zip Code
New York NY 10023-4198

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

Name of Employer Occupation
Arethusa Farm Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417245

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
Stephen F. Mandel Jr., Jr.

Mailing Address 20 Bobolink Road

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
Lone Pine Capital Money Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3433788

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Stephen F. Mandel Jr., Jr.
Mailing Address 20 Bobolink Road

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
Lone Pine Capital Money Manager

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3418182

Amount of Each Receipt this Period
2400.00

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

B. Full Name (Last, First, Middle Initial)
John H. McClutchy Jr., Jr.
Mailing Address 11 Molly Ln

City State Zip Code
Darien CT 06820-2929

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

Name of Employer Occupation
The JHM Group Real Estate Developer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3418590

Amount of Each Receipt this Period
2400.00

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

C. Full Name (Last, First, Middle Initial)
William J. McCue
Mailing Address One Liberty Square

City State Zip Code
New Britain CT 06050

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

Name of Employer Occupation
McCue Mortgage President

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3426008

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

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

Mailing Address 99 Old Church Road

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
N/A Farming

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3418170

Amount of Each Receipt this Period

2400.00

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

B.

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

Mailing Address 99 Old Church Road

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
N/A Farming

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4800.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3433787

Amount of Each Receipt this Period

2400.00

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

C.

Full Name (Last, First, Middle Initial)
Daniel McIntyre

Mailing Address 70 Lemay St.

City State Zip Code
West Hartford CT 06107

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

Name of Employer Occupation
Charlotte Hungerford Hospital Administrator

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425871

Amount of Each Receipt this Period

500.00

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

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 48 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 172 Minnechaug Drive

City State Zip Code
Glastonbury CT 06033

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 3 / 2 0 0 9

Transaction ID: C3417198

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 451 West End Ave Apt 9D

City State Zip Code
New York NY 10024-5363

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

Name of Employer Balestra Capital, Ltd. Occupation Investment Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 3 / 2 0 0 9

Transaction ID: C3279873

Amount of Each Receipt this Period
2400.00

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

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

Mailing Address 451 West End Ave Apt 9D

City State Zip Code
New York NY 10024-5363

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

Name of Employer Balestra Capital, Ltd. Occupation Investment Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 1 3 / 2 0 0 9

Transaction ID: C3279874

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Neil Mellen
Mailing Address 460 Coe Ave.
City East Haven State CT Zip Code 06512
FEC ID number of contributing federal political committee. **C**
Name of Employer Town Fair Tire Occupation Owner
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
4800.00
Date of Receipt 03 / 25 / 2009
Transaction ID: C3317860
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Neil Mellen
Mailing Address 460 Coe Ave.
City East Haven State CT Zip Code 06512
FEC ID number of contributing federal political committee. **C**
Name of Employer Town Fair Tire Occupation Owner
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
4800.00
Date of Receipt 03 / 25 / 2009
Transaction ID: C3317872
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Gregory Whitley Melville
Mailing Address 474 Maple Avenue
City Cheshire State CT Zip Code 06410
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Writer
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General Other (specify) ▼
2400.00
Date of Receipt 03 / 31 / 2009
Transaction ID: C3418421
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 7200.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 84 Blueberry Hill

City Waterbury State CT Zip Code 06704

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

Name of Employer Self-employed Occupation John Mendillo Landscaping

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009
Transaction ID: C3425974
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
Edwina S Millington

Mailing Address 49 Kinney Hill Rd

City New Preston Marble State CT Zip Code 06777-1809

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 29 / 2009
Transaction ID: C3417648
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 49 Kinney Hill Rd

City New Preston Marble State CT Zip Code 06777-1809

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 29 / 2009
Transaction ID: C3417647
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Alan L. Mittelsdorf

Mailing Address P.O.Box 301

City State Zip Code
Southbury CT 06488

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

Name of Employer Retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3495094

Amount of Each Receipt this Period
2400.00

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

B.

Full Name (Last, First, Middle Initial)
Alan L. Mittelsdorf

Mailing Address P.O.Box 301

City State Zip Code
Southbury CT 06488

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

Name of Employer Retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3495095

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
Margaret K Morelli

Mailing Address 158 Somerset Dr.

City State Zip Code
Berlin CT 06037

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

Name of Employer CANPFA Occupation Exec Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C3425983

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Sue R Morrill

Mailing Address 140 Bunker Hill Rd

City State Zip Code
Salisbury CT 06068-1023

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: C3425909

Amount of Each Receipt this Period
2400.00

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

B.

Full Name (Last, First, Middle Initial)
William F Morrill

Mailing Address 140 Bunker Hill Rd

City State Zip Code
Salisbury CT 06068-1023

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 3 / 2 0 0 9

Transaction ID: C3425912

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
Declan Murphy

Mailing Address Woodruff House
58 South Street

City State Zip Code
Litchfield CT 06759

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

Name of Employer Novens, LLC Occupation President & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 2 7 / 2 0 0 9

Transaction ID: C3417250

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
John Murphy
Mailing Address 3 Dylan Dr.
City Newtown State CT Zip Code 06470
FEC ID number of contributing federal political committee. **C**
Name of Employer Danbury Hospital Occupation Executive VP
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 500.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C3425904
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Bryan Muthersbaugh
Mailing Address 273 Andrassy Ave.
City Fairfield State CT Zip Code 06824
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Satellite Sales & Installations
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 1000.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C3425952
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Scott Nadel
Mailing Address 192 Bennetts Farm Rd
City Ridgefield State CT Zip Code 06877
FEC ID number of contributing federal political committee. **C**
Name of Employer Northeast Radiology Occupation Physician
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 2400.00
Date of Receipt 03 / 18 / 2009
Transaction ID: C3282944
Amount of Each Receipt this Period 2400.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 3900.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 54 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 18 Jakobs Landing Road

City State Zip Code
Westbrook CT 06498

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

Name of Employer Hospital of Central Connecticut Occupation Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425875

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 270 Kent Hollow Road

City State Zip Code
Kent CT 06757-1808

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

Name of Employer Kramer Levin Naftalis & Frankell LLP Occupation Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 21 / 2009

Transaction ID: C3284714

Amount of Each Receipt this Period
1500.00

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

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

Mailing Address 270 Kent Hollow Road

City State Zip Code
Kent CT 06757-1808

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

Name of Employer American Express Publishing Occupation Editor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID: C3284141

Amount of Each Receipt this Period
1500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 16 Colonial Drive North

City State Zip Code
Bloomfield CT 06002

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

Name of Employer Occupation
Jefferson Radiology Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417268

Amount of Each Receipt this Period
250.00

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

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

Mailing Address P.O. Box 0187
24 East Chestnut Hill Road

City State Zip Code
Litchfield CT 06759

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

Name of Employer Occupation
NA Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 24 / 2009

Transaction ID: C3417247

Amount of Each Receipt this Period
2400.00

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

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

Mailing Address 24 E Chestnut Hill Rd

City State Zip Code
Litchfield CT 06759

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

Name of Employer Occupation
O & G Industries Construction Executive

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417246

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 17 Juniper Ledge Lane
P.O. Box 1496

City Lakeville State CT Zip Code 06039

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

Name of Employer Oppenheimer & Close Occupation Investment Advisor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 03 / 25 / 2009
Transaction ID: C3317870
 Amount of Each Receipt this Period 2000.00

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

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

Mailing Address 61 Knollwood Lane

City New Canaan State CT Zip Code 06840

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

Name of Employer Energy Management Services Occupation Energy Broker

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009
Transaction ID: C3425948
 Amount of Each Receipt this Period 500.00

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

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

Mailing Address 1 Tinker Hill Rd

City New Preston State CT Zip Code 06777-1414

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

Name of Employer self-employed Occupation consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 03 / 27 / 2009
Transaction ID: C3417252
 Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4900.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 57 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
David Pena

Mailing Address 11 Avalon Drive

City Avon State CT Zip Code 06001

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009

Transaction ID: C3418777

Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
David A Pollack

Mailing Address 201 Route 37 S

City Sherman State CT Zip Code 06784

FEC ID number of contributing federal political committee. C

Name of Employer David Pollack, Vintage Posters Occupation self

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 23 / 2009

Transaction ID: C3425916

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Frank Pond

Mailing Address 2433 San Marco Drive

City Los Angeles State CA Zip Code 90068

FEC ID number of contributing federal political committee. C

Name of Employer Pond North LLP Occupation Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 27 / 2009

Transaction ID: C3417121

Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) 4400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Frank Pond

Mailing Address 2433 San Marco Drive

City State Zip Code
Los Angeles CA 90068

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

Name of Employer Occupation
Pond North LLP Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2400.00

Transaction ID: C3433464

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

B.

Full Name (Last, First, Middle Initial)
Elaine E. Pratt

Mailing Address 96 Benson Rd.

City State Zip Code
Bridgewater CT 06752

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

Name of Employer Occupation
retired psychotherapist

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2400.00

Transaction ID: C3417638

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

C.

Full Name (Last, First, Middle Initial)
Peter w Pratt

Mailing Address 96 Benson Rd

City State Zip Code
Bridgewater CT 06752-1503

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

Name of Employer Occupation
Self Physician

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
2400.00

Transaction ID: C3417639

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

SUBTOTAL of Receipts This Page (optional) ► **7200.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 100 North Main Street

City State Zip Code
Kent CT 06757

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

Name of Employer Occupation
Index-d Entrepreneur

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID: C3318175

Amount of Each Receipt this Period
1200.00

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

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

Mailing Address 4700 Connecticut Ave., NW #502

City State Zip Code
Washington DC 20008

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

Name of Employer Occupation
Palmetto Group Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2009

Transaction ID: C3317844

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 95 Roxbury Road

City State Zip Code
Plantsville CT 06479

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

Name of Employer Occupation
Waterbury Hospital Administrator/Nurse

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425892

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2450.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)

Hugh Rawson

Mailing Address 53 South St.

City State Zip Code
Roxbury CT 06783

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

Name of Employer self Occupation
writer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 232.46

Date of Receipt

M M / D D / Y Y Y Y
03 / 23 / 2009

Transaction ID: C3425917

Amount of Each Receipt this Period

32.46

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

* In-Kind: Invitations

B.

Full Name (Last, First, Middle Initial)

Hugh Rawson

Mailing Address 53 South St.

City State Zip Code
Roxbury CT 06783

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

Name of Employer self Occupation
writer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 232.46

Date of Receipt

M M / D D / Y Y Y Y
03 / 29 / 2009

Transaction ID: C3417642

Amount of Each Receipt this Period

200.00

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

C.

Full Name (Last, First, Middle Initial)

Thomas John Regan

Mailing Address 92 Wellington Heights Road

City State Zip Code
Avon CT 06001

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

Name of Employer Brown Rudnick LP Occupation
Attorney

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: C3425825

Amount of Each Receipt this Period

250.00

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

SUBTOTAL of Receipts This Page (optional) ▶

482.46

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 131
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Norm Norman Reich

Mailing Address 306 Twin Lakes Rd.

City State Zip Code
Salisbury CT 06068

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417270

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
William Rondina

Mailing Address 264 Henry Sanford Rd.

City State Zip Code
Bridgewater CT 06752

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

Name of Employer NM Rondina Inc Occupation Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417280

Amount of Each Receipt this Period
2400.00

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

C.

Full Name (Last, First, Middle Initial)
William Rondina

Mailing Address 264 Henry Sanford Rd.

City State Zip Code
Bridgewater CT 06752

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

Name of Employer NM Rondina Inc Occupation Designer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417282

Amount of Each Receipt this Period
100.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 456 Glenbrook Road

City State Zip Code
Stamford CT 06906

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 31 / 2009
Transaction ID: C3418247
 Amount of Each Receipt this Period: 250.00

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

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

Mailing Address PO Box 430

City State Zip Code
Sherman CT 06784-0430

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

Name of Employer none Occupation none

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 27 / 2009
Transaction ID: C3417302
 Amount of Each Receipt this Period: 2400.00

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

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

Mailing Address PO Box 430

City State Zip Code
Sherman CT 06784-0430

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

Name of Employer none Occupation none

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 27 / 2009
Transaction ID: C3417303
 Amount of Each Receipt this Period: 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Thomas Ryan

Mailing Address 4323 Westover Place NW

City State Zip Code
Washington DC 20016

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

Name of Employer
Ryan, MacKinnon, Vasapoli
and Berzok,

Occupation
Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425866

Amount of Each Receipt this Period

1000.00

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

B.

Full Name (Last, First, Middle Initial)
Gary Salva

Mailing Address 100 Northfield Dr., Suite 200

City State Zip Code
Windsor CT 06095

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

Name of Employer
Lincoln Financial

Occupation
Portfolio Manager

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425967

Amount of Each Receipt this Period

1000.00

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

C.

Full Name (Last, First, Middle Initial)
Lawrence G. Santilli

Mailing Address 31 Brunswick Ave.

City State Zip Code
West Hartford CT 06107

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

Name of Employer
Athena Health Care Systems

Occupation
President & CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425965

Amount of Each Receipt this Period

2250.00

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

SUBTOTAL of Receipts This Page (optional) ▶

4250.00

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

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

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

FOR LINE NUMBER: PAGE 64 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Richard Sbordone
Mailing Address 10 Williamsburg Dr.
City Cheshire State CT Zip Code 06410
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Central Electric
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 03 / 30 / 2009
Transaction ID: C3425978
Amount of Each Receipt this Period 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Martin Sbriglio
Mailing Address 88 Ryders Lane, Suite 204
City Stratford State CT Zip Code 06614
FEC ID number of contributing federal political committee. **C**
Name of Employer Ryder's Health Management Occupation President
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 03 / 24 / 2009
Transaction ID: C3308798
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Ken Schechter
Mailing Address 56 Taconic Rd
P.O. Box 304
City Salisbury State CT Zip Code 06068
FEC ID number of contributing federal political committee. **C**
Name of Employer retired Occupation retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 03 / 27 / 2009
Transaction ID: C3417122
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 65 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Mark E Scheinberg

Mailing Address 97 Injun Hollow Road

City State Zip Code
Hidden Nut CT 06424

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

Name of Employer Occupation
Goodwin College President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: C3495126

Amount of Each Receipt this Period
1000.00

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

B.

Full Name (Last, First, Middle Initial)
Russell Schwartz

Mailing Address 8 Inwood Lane

City State Zip Code
Farmington CT 06032

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

Name of Employer Occupation
Avon Health Care Director of Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C3425959

Amount of Each Receipt this Period
500.00

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

C.

Full Name (Last, First, Middle Initial)
Clarence J Silvia

Mailing Address 36 Ferguson Road

City State Zip Code
Manchester CT 06040

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

Name of Employer Occupation
Hospital of Central Connecticut Physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C3425877

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 23 Hyde Park Square
Flat #11

City London, W2 2NN State AA Zip Code 00000

FEC ID number of contributing federal political committee. C

Name of Employer Elliot Advisors Occupation Analyst

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C3426015

Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
Brad Lee Skinner

Mailing Address 51 Camp Hill Road

City Northfield State CT Zip Code 06778

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2400.00

Date of Receipt MM / DD / YYYY
03 / 27 / 2009

Transaction ID: C3417251

Amount of Each Receipt this Period 2400.00

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

C. Full Name (Last, First, Middle Initial)
Teresa Skinner-Berger

Mailing Address Stonegate on Fox Run Road

City Norwalk State CT Zip Code 06850

FEC ID number of contributing federal political committee. C

Name of Employer Athena Health Care Occupation Director of Clinical Services

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY
03 / 30 / 2009

Transaction ID: C3425962

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) 4400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 67 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Elizabeth C Smith

Mailing Address PO Box 125

City Sharon State CT Zip Code 06069

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

Name of Employer Self-Employed Occupation Freelance Writer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 25 / 2009

Transaction ID: C3317868

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Sue St. Pierre

Mailing Address 56 Winding Hill Road

City Montgomery State NY Zip Code 12549

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

Name of Employer Triple A Supply Occupation Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009

Transaction ID: C3495118

Amount of Each Receipt this Period 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Paul M Sterczala

Mailing Address 476 Golf Road

City Orange State CT Zip Code 06477

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

Name of Employer DHLs CPA's Occupation CPA

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425944

Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 68 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 183 Maple St.

City State Zip Code
Litchfield CT 06759

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

Name of Employer Occupation
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2009

Transaction ID: C3416501

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 183 Maple Street

City State Zip Code
Litchfield CT 06759

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

Name of Employer Occupation
retired sales

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 28 / 2009

Transaction ID: C3417524

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 83 W Woods Road 1
P.O. Box 415

City State Zip Code
Sharon CT 06069-2234

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

Name of Employer Occupation
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2009

Transaction ID: C3279868

Amount of Each Receipt this Period
2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **4400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
David Supino

Mailing Address 83 W Woods Road 1
P.O. Box 415

City Sharon State CT Zip Code 06069-2234

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

Name of Employer N/A Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt 03 / 13 / 2009

Transaction ID: C3279869

Amount of Each Receipt this Period 2400.00

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

B.

Full Name (Last, First, Middle Initial)
Laurence A Tanner

Mailing Address 11 Two Buck Ring

City Burlington State CT Zip Code 06013-1407

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

Name of Employer New Britain General Hospital Occupation President/CEO

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425873

Amount of Each Receipt this Period 500.00

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

C.

Full Name (Last, First, Middle Initial)
Allan B Taylor

Mailing Address 238 Whitney St.

City Hartford State CT Zip Code 06105

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

Name of Employer Day Pitney LLP Occupation attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2009

Transaction ID: C3418222

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 18 Winterwood Road

City State Zip Code
Southington CT 06439

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
H.D. Segur Ins. Insurance Agent/Broker/Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425956

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 24 Valley Run

City State Zip Code
Cromwell CT 06416

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Athena Health Care Director of Operations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425943

Amount of Each Receipt this Period 1000.00

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

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

Mailing Address 124A Country Club Road

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Waterbury Hospital Director of Public Relations

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 30 / 2009

Transaction ID: C3425870

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
John H. Tobin

Mailing Address 189 Hunters Ridge Road

City State Zip Code
Southbury CT 06488

FEC ID number of contributing federal political committee. C

Name of Employer Waterbury Hospital Occupation Hospital Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y
03 / 29 / 2009

Transaction ID: C3417675

Amount of Each Receipt this Period 500.00

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

B.

Full Name (Last, First, Middle Initial)
Edward R. Tufte

Mailing Address 1161 Sperry Rd

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation writer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3495128

Amount of Each Receipt this Period 2400.00

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

C.

Full Name (Last, First, Middle Initial)
Edward R. Tufte

Mailing Address 1161 Sperry Rd

City State Zip Code
Cheshire CT 06410

FEC ID number of contributing federal political committee. C

Name of Employer self Occupation writer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4800.00

Date of Receipt M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3495129

Amount of Each Receipt this Period 2400.00

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

SUBTOTAL of Receipts This Page (optional) 5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Michael T. Twohig

Mailing Address 22 Brian Woods Dr.

City Avon State CT Zip Code 06001

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

Name of Employer Radiologic Assoc of Hartford
Occupation Radiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 13 / 2009

Transaction ID: C3417236

Amount of Each Receipt this Period: 250.00

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

B.

Full Name (Last, First, Middle Initial)
Kenneth E Tyler

Mailing Address 85 S Main St
P.O. Box 1130

City Sharon State CT Zip Code 06069-2243

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

Name of Employer None
Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 16 / 2009

Transaction ID: C3280192

Amount of Each Receipt this Period: 2400.00

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

C.

Full Name (Last, First, Middle Initial)
Kenneth E Tyler

Mailing Address 85 S Main St
P.O. Box 1130

City Sharon State CT Zip Code 06069-2243

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

Name of Employer None
Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 16 / 2009

Transaction ID: C3433460

Amount of Each Receipt this Period: 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **5050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 73 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Melinda F. Vanden Heuvel

Mailing Address 92 South Street

City Washington State CT Zip Code 06793

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

Name of Employer none Occupation none

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2009
Transaction ID: C3417641
 Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
William J. vanden Heuvel

Mailing Address 92 South Street

City Washington State CT Zip Code 06793

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 29 / 2009
Transaction ID: C3417640
 Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 446 Long Mountain Road

City New Milford State CT Zip Code 06776-4825

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

Name of Employer ENI Petroleum Occupation Chairman

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 03 / 27 / 2009
Transaction ID: C3417275
 Amount of Each Receipt this Period: 2400.00

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

SUBTOTAL of Receipts This Page (optional) ► **4400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 131

(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Enzo Viscusi

Mailing Address 446 Long Mountain Road

City State Zip Code
New Milford CT 06776-4825

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

Name of Employer Occupation
ENI Petroleum Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417276

Amount of Each Receipt this Period

100.00

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

B.

Full Name (Last, First, Middle Initial)
Teresa Wable

Mailing Address 136 Talmadge Road

City State Zip Code
Cheshire CT 06410

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 19 / 2009

Transaction ID: C3283893

Amount of Each Receipt this Period

500.00

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

C.

Full Name (Last, First, Middle Initial)
Robert Wallace

Mailing Address 8 Valley View CT

City State Zip Code
Hamden CT 06518

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

Name of Employer Occupation
Romax Supply Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425941

Amount of Each Receipt this Period

250.00

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

SUBTOTAL of Receipts This Page (optional) ▶

850.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)

jean miriam weigert

Mailing Address 5 Nila Way

City State Zip Code
simsbury CT 06070

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

Name of Employer Occupation
mandell and blau md's pc physician

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: C3417238

Amount of Each Receipt this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)

Laurence Weiss

Mailing Address 1 Mountain Crest Drive

City State Zip Code
Cheshire CT 06410

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

Name of Employer Occupation
Medstate Radiology Association Radiologist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2009

Transaction ID: C3433902

Amount of Each Receipt this Period

250.00

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

C.

Full Name (Last, First, Middle Initial)

Hiram P Williams, Jr

Mailing Address 100 Treasure Hill Rd

City State Zip Code
South Kent CT 06785-1411

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

Name of Employer Occupation
Albrizzi-Williams, Inc. Finance

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 27 / 2009

Transaction ID: C3417273

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) Jason H Wright</p> <p>Mailing Address P.O. Box 94 90 Howland Road</p> <p>City State Zip Code South Kent CT 06785</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation Geer Mountain Holdings, LLC Private Equity</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">1000.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 9</p> <p>Transaction ID: C3279973</p> <p>Amount of Each Receipt this Period 1000.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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<p>B. Full Name (Last, First, Middle Initial) Alice B. Yoakum, Esq.</p> <p>Mailing Address 196 Millerton Rd P.O.Box 271</p> <p>City State Zip Code Lakeville CT 06039</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation self-employed (retired) lawyer</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">700.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9</p> <p>Transaction ID: C3317908</p> <p>Amount of Each Receipt this Period 700.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<p>C. Full Name (Last, First, Middle Initial) Jay A Youngling</p> <p>Mailing Address PO Box 456 54 Norfolk Rd.</p> <p>City State Zip Code Litchfield CT 06759</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation self business</p> <p>Receipt For: 2010 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">4800.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9</p> <p>Transaction ID: C3425926</p> <p>Amount of Each Receipt this Period 2400.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	4100.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 77 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Jay A Youngling

Mailing Address PO Box 456
54 Norfolk Rd.

City Litchfield State CT Zip Code 06759

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

Name of Employer self Occupation business

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ **4800.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: C3425927

Amount of Each Receipt this Period

2400.00

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

SUBTOTAL of Receipts This Page (optional)	2400.00
TOTAL This Period (last page this line number only)	301032.46

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 78 / 131
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

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

Mailing Address 430 S. Capitol St., SE

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00000935

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 30.20

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2009

Transaction ID: C3507828

Amount of Each Receipt this Period
30.20

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

* In-Kind: Telephone and fax services

SUBTOTAL of Receipts This Page (optional)	▶	30.20
TOTAL This Period (last page this line number only)	▶	30.20

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

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

FOR LINE NUMBER: PAGE 79 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
AETNA INC. POLITICAL ACTION COMMITTEE

Mailing Address 151 Farmington Ave.
RW4A

City State Zip Code
Hartford CT 06156

FEC ID number of contributing federal political committee. **C** C00181826

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: C3495089

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN ACADEMY OF DERMATOLOGY ASSOCIATION POLITI

Mailing Address 1350 I St NW
Ste 870

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: C3425938

Amount of Each Receipt this Period
2500.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION

Mailing Address 1891 Preston White Drive

City State Zip Code
Reston VA 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	9

Transaction ID: C3317835

Amount of Each Receipt this Period
5000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 131

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. C C00343459

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3425933

Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF SURGEONS PROFESSIONAL ASSOCIAT

Mailing Address 1640 Wisconsin Ave NW

City Washington State DC Zip Code 20007

FEC ID number of contributing federal political committee. C C00382424

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 01 / 2009

Transaction ID: C3495122

Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSOCIATION PAC

Mailing Address 325 Seventh Street NW
Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. C C00106146

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt M M / D D / Y Y Y Y Y
03 / 01 / 2009

Transaction ID: C3495120

Amount of Each Receipt this Period 2500.00

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

SUBTOTAL of Receipts This Page (optional) 4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 81 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
AMERICAN INSURANCE ASSOCIATION POLITICAL ACTION CO

Mailing Address 1130 Connecticut Avenue NW
Suite 1000

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00103143

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: C3426117
 Amount of Each Receipt this Period 1000.00

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

B. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL AC

Mailing Address 520 N. NORTHWEST HIGHWAY

City PARK RIDGE State IL Zip Code 60068

FEC ID number of contributing federal political committee. **C** C00255752

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 11 / 2009
Transaction ID: C3278771
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
AON CORPORATION POLITICAL ACTION COMMITTEE (AON PA

Mailing Address 200 EAST RANDOLPH

City CHICAGO State IL Zip Code 60601

FEC ID number of contributing federal political committee. **C** C00211250

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt 03 / 31 / 2009
Transaction ID: C3425935
 Amount of Each Receipt this Period 3000.00

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

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

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

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

FOR LINE NUMBER: PAGE 82 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
APWU COPA
Mailing Address 1300 L St.
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00010322
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00
Date of Receipt: 03 / 30 / 2009
Transaction ID: C3426020
Amount of Each Receipt this Period: 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
CITIZENS FINANCIAL GROUP INC. POLITICAL COMMITTEE
Mailing Address C/o Donna L. Brady Treasurer
One Citizens Plaza 12th Floor
City Providence State RI Zip Code 02903
FEC ID number of contributing federal political committee. **C** C00307249
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C3495096
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Comcast Corp. PAC
Mailing Address 1500 Market Street
35th Floor
City Philadelphia State PA Zip Code 19102
FEC ID number of contributing federal political committee. **C** C00248716
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00
Date of Receipt: 03 / 31 / 2009
Transaction ID: C3426119
Amount of Each Receipt this Period: 2000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 83 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION
 Mailing Address 100 INDIANA AVE. N. W.
 City State Zip Code
 WASHINGTON DC 20001
 FEC ID number of contributing federal political committee. **C** C00023580
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 2500.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3426028
 Amount of Each Receipt this Period
 2500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL AC
 Mailing Address 701 Pennsylvania Avenue NW
 Suite 750
 City State Zip Code
 Washington DC 20004
 FEC ID number of contributing federal political committee. **C** C00039578
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2009
Transaction ID: C3426041
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE
 Mailing Address 501 Third Street NW
 City State Zip Code
 Washington DC 20001
 FEC ID number of contributing federal political committee. **C** C00002089
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 1000.00
 Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 27 / 2009
Transaction ID: C3417310
 Amount of Each Receipt this Period
 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 84 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INT
Mailing Address 1125 17TH ST. NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00029504

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 25 / 2009

Transaction ID: C3317834

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
FRIENDS OF RAHM EMANUEL
Mailing Address P.O. Box 101124

City State Zip Code
Chicago IL 60610

FEC ID number of contributing federal political committee. **C** C00368829

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 30 / 2009

Transaction ID: C3264187

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
HARTFORD FINANCIAL SERVICES GROUP INC ADVOCATES FU
Mailing Address HARTFORD PLAZA

City State Zip Code
HARTFORD CT 06115

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 25 / 2009

Transaction ID: C3317847

Amount of Each Receipt this Period
2000.00

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

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

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

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

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

FOR LINE NUMBER: PAGE 85 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL

Mailing Address 1615 L Street NW
Suite 900

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 0 / 2 0 0 9

Transaction ID: C3426017

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA POLITICAL

Mailing Address 412 First Street SE Suite 300

City State Zip Code
Washington DC 20003

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 3 0 / 2 0 0 9

Transaction ID: C3426002

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL

Mailing Address 1750 New York Ave. NW
Suite 400

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 3 / 2 3 / 2 0 0 9

Transaction ID: C3425920

Amount of Each Receipt this Period
5000.00

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

SUBTOTAL of Receipts This Page (optional) ► 8000.00

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

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

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

FOR LINE NUMBER: PAGE 86 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE STRUCTURAL ORNAMENTAL

Mailing Address 1750 New York Ave. NW
Suite 400

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00027359

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 03 / 27 / 2009
Transaction ID: C3417309
 Amount of Each Receipt this Period 5000.00

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

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS CO

Mailing Address 900 Seventh St. N.W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 03 / 13 / 2009
Transaction ID: C3279877
 Amount of Each Receipt this Period 5000.00

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

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL UNION OF PAINTERS AND ALLIED TRADES

Mailing Address 1750 New York Avenue NW

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00000885

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt 03 / 11 / 2009
Transaction ID: C3278788
 Amount of Each Receipt this Period 5000.00

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

SUBTOTAL of Receipts This Page (optional) ► 15000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K Street, NW
Suite 500

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00213173

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: C3317852
Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
KPMG PARTNERS/PRINCIPALS & EMPLOYEES POLITICAL ACT

Mailing Address PO BOX 18254

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00280222

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: C3425921
Amount of Each Receipt this Period: 2000.00

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

C. Full Name (Last, First, Middle Initial)
LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL

Mailing Address 905 16th St. N.W.
Second Floor

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00007922

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 03 / 30 / 2009
Transaction ID: C3426006
Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 131
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 Pennsylvania Ave NW
8th Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 25 / 2009

Transaction ID: C3317855

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLIT

Mailing Address 1325 Massachusetts Ave. NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID: C3426038

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
NATIONAL CABLE AND TELECOMMUNICATIONS ASSOCIATION

Mailing Address 25 Massachusetts Avenue, NW #100

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID: C3495093

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 89 / 131

(check only one)

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

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)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY & M		Date of Receipt
	Mailing Address 10 G St. NE Suite 600		<input type="checkbox"/> 03 / <input type="checkbox"/> 25 / <input type="checkbox"/> 2009
	City	State	Zip Code
	Washington	DC	20002
	FEC ID number of contributing federal political committee. C C00172296		Transaction ID: C3317858
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="checkbox"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC		Date of Receipt
	Mailing Address 100 Daingerfield Road		<input type="checkbox"/> 03 / <input type="checkbox"/> 31 / <input type="checkbox"/> 2009
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. C C00030809		Transaction ID: C3426410
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="checkbox"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) NEA FUND FOR CHILDREN AND PUBLIC EDUCATION		Date of Receipt
	Mailing Address 1201 16th St NW Ste 420		<input type="checkbox"/> 03 / <input type="checkbox"/> 28 / <input type="checkbox"/> 2009
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. C C00003251		Transaction ID: C3495083
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="checkbox"/> 1500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 90 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
NORTHEAST UTILITIES EMPLOYEES' POLITICAL ACTION CO

Mailing Address Federal Governmental Affairs
601 Pennsylvania Ave NW Suite 620

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00102160

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 31 / 2009
Transaction ID: C3425862
 Amount of Each Receipt this Period: 2000.00

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

B. Full Name (Last, First, Middle Initial)
PITNEY BOWES INC POLITICAL ACTION COMMITTEE

Mailing Address 1 Elmcroft Rd
MSC 6423

City Stamford State CT Zip Code 06926-0700

FEC ID number of contributing federal political committee. **C** C00339499

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 25 / 2009
Transaction ID: C3317882
 Amount of Each Receipt this Period: 2000.00

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

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

Mailing Address 1301 K Street NW
Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 03 / 23 / 2009
Transaction ID: C3425937
 Amount of Each Receipt this Period: 2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 6000.00

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

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

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

FOR LINE NUMBER: PAGE 91 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION POL

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	3	/	2	0	0	9

Transaction ID: C3425924

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
SPRINT NEXTEL CORPORATION POLITICAL ACTION COMMITT

Mailing Address 900 7th Street Suite 700

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: C3495110

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address One Tower Square

City State Zip Code
Hartford CT 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	9

Transaction ID: C3432401

Amount of Each Receipt this Period
2000.00

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

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 131
	(check only one)
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial) UNITED BROTHERHOOD OF CARPENTERS/JOINERS OF AMER N		Date of Receipt
Mailing Address 427 STILLSON RD. P.O. BOX 668		<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
City	State	Zip Code
FAIRFIELD	CT	06824
FEC ID number of contributing federal political committee.		Transaction ID: C3278818
<input type="text" value="C"/> <input type="text" value="C00150045"/>		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Washington Democratic Town Committee		Date of Receipt
Mailing Address P.O. Box 5		<input type="text" value="01"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
City	State	Zip Code
Washington	CT	06794
FEC ID number of contributing federal political committee.		Transaction ID: C3250778
<input type="text" value="C"/> <input type="text" value=""/>		Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2010	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="6000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="86500.00"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 93 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial) AT&T
 Mailing Address P.O. Box 8110
 City Aurora State IL Zip Code 60507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 629.17
 Date of Receipt: 01 / 05 / 2009
Transaction ID: C3170710
 Amount of Each Receipt this Period: 141.53
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial) AT&T
 Mailing Address P.O. Box 8110
 City Aurora State IL Zip Code 60507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 629.17
 Date of Receipt: 02 / 11 / 2009
Transaction ID: C3265554
 Amount of Each Receipt this Period: 172.79
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial) AT&T
 Mailing Address P.O. Box 8110
 City Aurora State IL Zip Code 60507
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼ 629.17
 Date of Receipt: 03 / 01 / 2009
Transaction ID: C3495124
 Amount of Each Receipt this Period: 65.69
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **380.01**
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 94 / 131
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
AT&T
Mailing Address P.O. Box 8110
City Aurora State IL Zip Code 60507
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 629.17
Date of Receipt 03 / 25 / 2009
Transaction ID: C3317861
Amount of Each Receipt this Period 39.64
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund

B. Full Name (Last, First, Middle Initial)
Bank of America Commercial Card
Mailing Address PO Box 15731
City Wilmington State DE Zip Code 19886-5731
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 795.00
Date of Receipt 03 / 11 / 2009
Transaction ID: C3278784
Amount of Each Receipt this Period 795.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund of Excess Fees Charged in Error

C. Full Name (Last, First, Middle Initial)
Media Strategies
Mailing Address 9990 Lee Highway, Ste 210
City Fairfax State VA Zip Code 22030
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6870.45
Date of Receipt 03 / 11 / 2009
Transaction ID: C3278643
Amount of Each Receipt this Period 6870.45
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund of Overpayment

SUBTOTAL of Receipts This Page (optional) ▶ **7705.09**
TOTAL This Period (last page this line number only) ▶ **8085.10**

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Access Capital, INC</p> <p>Mailing Address 405 Park Ave</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Door to Door, Get Out the Vote</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212100</p> <p>Date of Disbursement 01 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 220.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Access Capital, INC</p> <p>Mailing Address 405 Park Ave</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Door to Door, Get Out the Vote</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212102</p> <p>Date of Disbursement 01 / 23 / 2009</p> <p>Amount of Each Disbursement this Period 2664.72</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Express Establishment Services</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072-3852</p> <p>Purpose of Disbursement Merchant Service Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212959</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 4.50</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2889.70

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60507 Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212092 Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 396.44 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60507 Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212093 Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 210.43 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 8110 City Aurora State IL Zip Code 60507 Purpose of Disbursement Phone Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D213512 Date of Disbursement 02 / 20 / 2009 Amount of Each Disbursement this Period 176.46 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	783.33
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th St, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Federal Income Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D214170</p> <p>Date of Disbursement 03 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 27.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th St, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D213499</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 18.06</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th St, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D250699</p> <p>Date of Disbursement 03 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 21.48</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

66.54

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address 730 15th St, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D251176</p> <p>Date of Disbursement 02 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 18.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Connecticut Light & Power</p> <p>Mailing Address Northeast Utilities P.O. Box 2960</p> <p>City Hartford State CT Zip Code 06104</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212962</p> <p>Date of Disbursement 02 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 119.26</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Connecticut Light & Power</p> <p>Mailing Address Northeast Utilities P.O. Box 2960</p> <p>City Hartford State CT Zip Code 06104</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212090</p> <p>Date of Disbursement 01 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 298.65</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

436.61

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) David J Cooling</p> <p>Mailing Address 2627 39th St NW Apt 4</p> <p>City Washington State DC Zip Code 20007-1222</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212745 Date of Disbursement 01 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3564.29</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) David J Cooling</p> <p>Mailing Address 2627 39th St NW Apt 4</p> <p>City Washington State DC Zip Code 20007-1222</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D213680 Date of Disbursement 02 / 27 / 2009</p> <p>Amount of Each Disbursement this Period 3564.29</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) David J Cooling</p> <p>Mailing Address 2627 39th St NW Apt 4</p> <p>City Washington State DC Zip Code 20007-1222</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D247648 Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 3608.70</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

10737.28

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) DC Treasurer Mailing Address Office of Tax and Revenue PO Box 96385 City Washington State DC Zip Code 20090 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D213504 Date of Disbursement 02 / 20 / 2009 Amount of Each Disbursement this Period 332.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) DC Treasurer Mailing Address Office of Tax and Revenue PO Box 96385 City Washington State DC Zip Code 20090 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D213679 Date of Disbursement 02 / 28 / 2009 Amount of Each Disbursement this Period 332.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) DC Treasurer Mailing Address Office of Tax and Revenue PO Box 96385 City Washington State DC Zip Code 20090 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D212094 Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 666.66 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1330.66

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Downtown Whiting, LLC Mailing Address 310 Cooke Street City Plainville State CT Zip Code 06062 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212089 Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Mrs. Allison Griner Mailing Address 4971 Allan Rd. City Bethesda State MD Zip Code 20816 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212087 Date of Disbursement 01 / 15 / 2009 Amount of Each Disbursement this Period 3600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mrs. Allison Griner Mailing Address 4971 Allan Rd. City Bethesda State MD Zip Code 20816 Purpose of Disbursement Fundraising Consulting Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D213507 Date of Disbursement 02 / 20 / 2009 Amount of Each Disbursement this Period 3600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7550.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Mrs. Allison Griner Mailing Address 4971 Allan Rd. City Bethesda State MD Zip Code 20816 Purpose of Disbursement Fundraising Consulting Services Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D247733 Date of Disbursement 03 / 31 / 2009 Amount of Each Disbursement this Period 3600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Kent Wine and Spirit Mailing Address PO Box 484 24 N. Main Street City Kent State CT Zip Code 06757 Purpose of Disbursement Event Expense Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D213511 Date of Disbursement 02 / 20 / 2009 Amount of Each Disbursement this Period 297.58 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) National Democratic Club Mailing Address 30 Ivy Street, SE City Washington State DC Zip Code 20003 Purpose of Disbursement Annual Membership Dues Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D213873 Date of Disbursement 03 / 05 / 2009 Amount of Each Disbursement this Period 480.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4377.58

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
New Britain Professional Building LLC

Mailing Address 121 Pebblebrook Dr

City Rocky Hill State CT Zip Code 06067-4214

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D213677

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	2		2	0	0	9

Amount of Each Disbursement this Period

1300.00

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

B. Full Name (Last, First, Middle Initial)
New Britain Professional Building LLC

Mailing Address 121 Pebblebrook Dr

City Rocky Hill State CT Zip Code 06067-4214

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212086

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	0	9

Amount of Each Disbursement this Period

1300.00

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

C. Full Name (Last, First, Middle Initial)
New Britain Professional Building LLC

Mailing Address 121 Pebblebrook Dr

City Rocky Hill State CT Zip Code 06067-4214

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212963

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	3		2	0	0	9

Amount of Each Disbursement this Period

1300.00

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

SUBTOTAL of Disbursements This Page (optional) ►

3900.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
New Britain Professional Building LLC

Mailing Address 121 Pebblebrook Dr

City Rocky Hill State CT Zip Code 06067-4214

Purpose of Disbursement
Rent

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D247745

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	9	

Amount of Each Disbursement this Period

1300.00

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

B. Full Name (Last, First, Middle Initial)
NGP Software, Inc.

Mailing Address 1225 Eye St, NW
Suite 1225

City Washington State DC Zip Code 20005

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212091

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	5		2	0	9	

Amount of Each Disbursement this Period

2247.00

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

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

Mailing Address Suite 302
55 Capital Blvd.

City Rocky Hill State CT Zip Code 06067

Purpose of Disbursement
Payroll Taxes

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212746

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	1		2	0	9	

Amount of Each Disbursement this Period

2038.12

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

SUBTOTAL of Disbursements This Page (optional) ►

5585.12

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

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

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FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D212961 Date of Disbursement 01 / 12 / 2009
	Mailing Address Suite 302 55 Capital Blvd.	Amount of Each Disbursement this Period 141.23
	City Rocky Hill State CT Zip Code 06067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Processing Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D213510 Date of Disbursement 02 / 10 / 2009
	Mailing Address Suite 302 55 Capital Blvd.	Amount of Each Disbursement this Period 389.69
	City Rocky Hill State CT Zip Code 06067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Processing Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D214222 Date of Disbursement 03 / 10 / 2009
	Mailing Address Suite 302 55 Capital Blvd.	Amount of Each Disbursement this Period 82.40
	City Rocky Hill State CT Zip Code 06067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Processing Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	613.32
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D247651 Date of Disbursement 03 / 31 / 2009
	Mailing Address Suite 302 55 Capital Blvd.	Amount of Each Disbursement this Period 1850.43
	City Rocky Hill State CT Zip Code 06067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paychex	Transaction ID: D251177 Date of Disbursement 02 / 27 / 2009
	Mailing Address Suite 302 55 Capital Blvd.	Amount of Each Disbursement this Period 1932.09
	City Rocky Hill State CT Zip Code 06067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Payroll Taxes Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PCMS, LLC	Transaction ID: D247747 Date of Disbursement 03 / 31 / 2009
	Mailing Address 5304 McKinley Street	Amount of Each Disbursement this Period 3390.79
	City Bethesda State MD Zip Code 20814	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Compliance Consulting Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7173.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial) SunTrust Merchant Services Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: D214241 Date of Disbursement 03 / 11 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) SunTrust Merchant Services Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: D214242 Date of Disbursement 02 / 11 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) SunTrust Merchant Services Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Transaction ID: D212960 Date of Disbursement 01 / 13 / 2009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) The Harty Press	Transaction ID: D212101 Date of Disbursement 01 / 22 / 2009
	Mailing Address PO Box 392	Amount of Each Disbursement this Period 4585.08
	City Brattleboro State VT Zip Code 05302	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Printing Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D213508 Date of Disbursement 02 / 20 / 2009
	Mailing Address P.O. Box 17120	Amount of Each Disbursement this Period 1438.01
	City Tucson State AZ Zip Code 85731	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cell Phone Service Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: D214221 Date of Disbursement 03 / 16 / 2009
	Mailing Address P.O. Box 17120	Amount of Each Disbursement this Period 608.32
	City Tucson State AZ Zip Code 85731	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cell Phone Service Candidate Name Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	6631.41
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial)
Bank of America Commercial Card

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886-5731

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210954

Date of Disbursement

01 / 04 / 2009

Amount of Each Disbursement this Period

2662.34

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

B. Full Name (Last, First, Middle Initial)
Bank of America Commercial Card

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886-5731

Purpose of Disbursement
Credit Card Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210955

Date of Disbursement

01 / 04 / 2009

Amount of Each Disbursement this Period

15.00

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

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
J Timothy's Tavern

Mailing Address 143 New Britain Ave

City Plainville State CT Zip Code 06062

Purpose of Disbursement
Catering Expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210964

Date of Disbursement

01 / 04 / 2009

Amount of Each Disbursement this Period

150.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2662.34

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Shred-It Connecticut

Mailing Address 29 Diana Court

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Shredding Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210960
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	9

Amount of Each Disbursement this Period

561.80

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Southwest Airlines

Mailing Address P.O. Box 36647

City Dallas State TX Zip Code 75235

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210963
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	9

Amount of Each Disbursement this Period

277.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 544 Straits Tpke

City Watertown State CT Zip Code 06795

Purpose of Disbursement
Office Supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D210958
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	4		2	0	0	9

Amount of Each Disbursement this Period

15.66

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D210959 Date of Disbursement 01 / 04 / 2009
	Mailing Address 544 Straits Tpke	Amount of Each Disbursement this Period -84.59
	City Watertown State CT Zip Code 06795	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Returned Office Supplies Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) The White Hart	Transaction ID: D210962 Date of Disbursement 01 / 04 / 2009
	Mailing Address 15 Undermountain Rd.	Amount of Each Disbursement this Period 1152.90
	City Salisbury State CT Zip Code 06068	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Fundraising Event Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) United States Postal Service	Transaction ID: D210956 Date of Disbursement 01 / 04 / 2009
	Mailing Address 210 Maple Ave	Amount of Each Disbursement this Period 314.01
	City Cheshire State CT Zip Code 06410	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 112 / 131

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) David J Cooling Mailing Address 2627 39th St NW Apt 4 City Washington State DC Zip Code 20007-1222 Purpose of Disbursement Reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D212104 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9 Amount of Each Disbursement this Period 214.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) CareFirst BlueCross BlueShield Mailing Address PO Box 79749 City Baltimore State MD Zip Code 21279-0749 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D212704 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 9 Amount of Each Disbursement this Period 214.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Bank of America Commercial Card Mailing Address PO Box 15731 City Wilmington State DE Zip Code 19886-5731 Purpose of Disbursement Credit Card Payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: D212110 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 9 Amount of Each Disbursement this Period 6185.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	6399.61
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Bank of America Commercial Card	Transaction ID: D212111 Date of Disbursement 02 / 04 / 2009
	Mailing Address PO Box 15731	Amount of Each Disbursement this Period 15.00
	City Wilmington State DE Zip Code 19886-5731	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Credit Card Fee Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Dollar Rental Car	Transaction ID: D212113 Date of Disbursement 02 / 04 / 2009
	Mailing Address 598 Elm Street	Amount of Each Disbursement this Period 403.59
	City Windsor Locks State CT Zip Code 06096	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Travel Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) GW Tavern	Transaction ID: D212114 Date of Disbursement 02 / 04 / 2009
	Mailing Address 20 Bee Brook Rd.	Amount of Each Disbursement this Period 4030.00
	City Washington Depot State CT Zip Code 06794	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Catering Expense Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Hartford Marriott Farmington

Mailing Address 15 Farm Springs Road

City Farmington State CT Zip Code 06032

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	9	

Amount of Each Disbursement this Period

499.16

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
J Timothy's Tavern

Mailing Address 143 New Britain Ave

City Plainville State CT Zip Code 06062

Purpose of Disbursement
Catering Expense

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212115

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	9	

Amount of Each Disbursement this Period

965.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 210 Maple Ave

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D212122

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	4		2	0	9	

Amount of Each Disbursement this Period

7.55

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America Commercial Card</p> <p>Mailing Address PO Box 15731</p> <p>City Wilmington State DE Zip Code 19886-5731</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D213501</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 265.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America Commercial Card</p> <p>Mailing Address PO Box 15731</p> <p>City Wilmington State DE Zip Code 19886-5731</p> <p>Purpose of Disbursement Bank Service Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D213502</p> <p>Date of Disbursement 01 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 265.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) David J Cooling</p> <p>Mailing Address 2627 39th St NW Apt 4</p> <p>City Washington State DC Zip Code 20007-1222</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D213505</p> <p>Date of Disbursement 02 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 214.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

479.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
CareFirst BlueCross BlueShield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D213506
Date of Disbursement

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

Amount of Each Disbursement this Period

214.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Bank of America Commercial Card

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886-5731

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D213514
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Amount of Each Disbursement this Period

2741.69

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

C.

Full Name (Last, First, Middle Initial)
Bank of America Commercial Card

Mailing Address PO Box 15731

City Wilmington State DE Zip Code 19886-5731

Purpose of Disbursement
Credit Card Fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D213520
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Amount of Each Disbursement this Period

15.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2741.69

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) Bistro Bis	Transaction ID: D213518
	Mailing Address 15 E St. NW	Date of Disbursement 03 / 05 / 2009
	City Washington State DC Zip Code 20001	Amount of Each Disbursement this Period 1390.45
	Purpose of Disbursement Catering Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kingsmill Resort	Transaction ID: D213517
	Mailing Address 1010 Kingsmill Road	Date of Disbursement 03 / 05 / 2009
	City Williamsburg State VA Zip Code 23185	Amount of Each Disbursement this Period 975.00
	Purpose of Disbursement Caucus Retreat Expense	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Southwest Airlines	Transaction ID: D213519
	Mailing Address P.O. Box 36647	Date of Disbursement 03 / 05 / 2009
	City Dallas State TX Zip Code 75235	Amount of Each Disbursement this Period 277.20
	Purpose of Disbursement Travel	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name	[MEMO ITEM]
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 210 Maple Ave

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Postage

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D213515
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	9

Amount of Each Disbursement this Period

52.28

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Mr. Kenneth J. Curran

Mailing Address 16 Hard Hill Rd. N

City Bethlehem State CT Zip Code 06751

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D214219
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

Amount of Each Disbursement this Period

31.01

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

C.

Full Name (Last, First, Middle Initial)
David J Cooling

Mailing Address 2627 39th St NW
Apt 4

City Washington State DC Zip Code 20007-1222

Purpose of Disbursement
Reimbursement

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D247742
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

Amount of Each Disbursement this Period

656.98

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

SUBTOTAL of Disbursements This Page (optional) ▶

687.99

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
Courtyard Marriott

Mailing Address 63 Grand Street

City Waterbury State CT Zip Code 06702

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D247743
Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

403.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Dollar Rental Car

Mailing Address 598 Elm Street

City Windsor Locks State CT Zip Code 06096

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D247744
Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

253.98

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Chris S. Murphy

Mailing Address 825 Wolf Hill Rd.

City Cheshire State CT Zip Code 06410

Purpose of Disbursement
Reimbursement

Candidate Name
Sen. Christopher S. Murphy

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 05

Transaction ID: D247748
Date of Disbursement

03 / 31 / 2009

Amount of Each Disbursement this Period

793.67

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

SUBTOTAL of Disbursements This Page (optional)

793.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Best Buy</p> <p>Mailing Address 470 Lewis Ave</p> <p>City Meriden State CT Zip Code 06451</p> <p>Purpose of Disbursement Electronic Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D247750</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 423.99</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Paul's Restaurant</p> <p>Mailing Address 1127 Highland Ave</p> <p>City Cheshire State CT Zip Code 06410</p> <p>Purpose of Disbursement Catering Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D247749</p> <p>Date of Disbursement 03 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 369.68</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

65944.16

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) ADLER FOR CONGRESS</p> <p>Mailing Address 14 KNIGHTSWOOD DRIVE</p> <p>City MARLTON State NJ Zip Code 08053</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John Adler</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NJ District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219453</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) BOCCIERI FOR CONGRESS</p> <p>Mailing Address PO Box 3016</p> <p>City Alliance State OH Zip Code 44601</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name John Bocchieri</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 16</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219445</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) BRIGHT FOR CONGRESS.COM</p> <p>Mailing Address P.O.Box 2106</p> <p>City Montgomery State AL Zip Code 36102</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Bobby Bright</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AL District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219441</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS</p> <p>Mailing Address PO BOX 177</p> <p>City BOONEVILLE State MS Zip Code 38829</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Travis Childers</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: MS District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219442</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ALAN GRAYSON</p> <p>Mailing Address 8419 OAK PARK ROAD</p> <p>City ORLANDO State FL Zip Code 32819</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Alan Grayson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D247736</p> <p>Date of Disbursement 03 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) DRIEHAUS FOR CONGRESS</p> <p>Mailing Address 650 FOX TRAILS WAY</p> <p>City CINCINNATI State OH Zip Code 45233</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Steve Driehaus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219435</p> <p>Date of Disbursement 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.

Full Name (Last, First, Middle Initial)
FRIENDS OF DAN MAFFEI

Transaction ID: D247746
Date of Disbursement

Mailing Address PO Box 74

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	9

City Syracuse State NY Zip Code 13214

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Dan Maffei

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

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 25

B.

Full Name (Last, First, Middle Initial)
GRIFFITH FOR CONGRESS

Transaction ID: D247735
Date of Disbursement

Mailing Address PO BOX 2916

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	0		2	0	0	9

City Huntsville State AL Zip Code 35804

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Parker Griffith

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

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AL District: 05

C.

Full Name (Last, First, Middle Initial)
JIM HIMES FOR CONGRESS

Transaction ID: D219455
Date of Disbursement

Mailing Address 65 High Ridge Road
BOX 456

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

City Stamford State CT Zip Code 06905

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

Category/ Type

Candidate Name
Jim Himes

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

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 04

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) KATHY DAHLKEMPER FOR CONGRESS</p> <p>Mailing Address PO Box 1045</p> <p>City Erie State PA Zip Code 16512</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Kathy Dahlkemper</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219446 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) KILROY FOR CONGRESS</p> <p>Mailing Address 550 East Walnut Street Ste 305</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Mary Jo Kilroy</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 15</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219443 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) KIRKPATRICK FOR ARIZONA</p> <p>Mailing Address PO Box 993</p> <p>City Prescott State AZ Zip Code 86302</p> <p>Purpose of Disbursement Contribution <input type="checkbox"/></p> <p>Candidate Name Ann Kirkpatrick</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219449 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

<p>A. Full Name (Last, First, Middle Initial) KISSELL FOR CONGRESS</p> <p>Mailing Address P.O. Box 1530</p> <p>City Biscoe State NC Zip Code 27209</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Larry Kissell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219439 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) KOSMAS FOR CONGRESS</p> <p>Mailing Address PO Box 1547</p> <p>City New Smyrna Beach State FL Zip Code 32170</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Suzanne Kosmas</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219444 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) FRANK KRATOVIL FOR CONGRESS</p> <p>Mailing Address 222 Main Sail Drive PO Box 518</p> <p>City Stevensville State MD Zip Code 21666</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Frank Kratovil</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D219436 Date of Disbursement: 03 / 25 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) MARKEY FOR CONGRESS Mailing Address PO Box 1333 City Fort Collins State CO Zip Code 80521 Purpose of Disbursement Contribution Candidate Name Betsy Markey Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 04	Transaction ID: D219451 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	5	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	5	/	2	0	0	9														
1000.00																							
B.	Full Name (Last, First, Middle Initial) MARTIN HEINRICH FOR CONGRESS Mailing Address 2118 CENTRAL AVENUE SE #71 City Albuquerque State NM Zip Code 87106 Purpose of Disbursement Contribution Candidate Name Martin Heinrich Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NM District: 01	Transaction ID: D247734 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	3	0	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	3	0	/	2	0	0	9														
1000.00																							
C.	Full Name (Last, First, Middle Initial) MASSA FOR CONGRESS Mailing Address 60 EAST MARKET STREET SUITE 244 City CORNING State NY Zip Code 14830 Purpose of Disbursement Contribution Candidate Name Eric Massa Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 29	Transaction ID: D219448 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">1000.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	5	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3	/	2	5	/	2	0	0	9														
1000.00																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">3000.00</td> </tr> </table>	3000.00
3000.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) MINNICK FOR CONGRESS	Transaction ID: D219438 Date of Disbursement 03 / 25 / 2009	
	Mailing Address P O Box 306		
	City Boise State ID Zip Code 83701	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name Walt Minnick		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: ID District: 01	Category/Type	
B.	Full Name (Last, First, Middle Initial) PERRIELLO FOR CONGRESS	Transaction ID: D219440 Date of Disbursement 03 / 25 / 2009	
	Mailing Address PO BOX 306		
	City IVY State VA Zip Code 22945	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name Tom Perriello		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: VA District: 05	Category/Type	
C.	Full Name (Last, First, Middle Initial) PETERS FOR CONGRESS	Transaction ID: D219447 Date of Disbursement 03 / 25 / 2009	
	Mailing Address PO BOX 226		
	City BLOOMFIELD HILLS State MI Zip Code 48303	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
	Candidate Name Gary Peters		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MI District: 09	Category/Type	

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 128 / 131

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

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NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: D219452
	Mailing Address PO BOX 100	Date of Disbursement 03 / 25 / 2009
	City BATTLE CREEK State MI Zip Code 49016	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Mark Schauer	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: MI District: 07	
B.	Full Name (Last, First, Middle Initial) Scott Murphy for Congress	Transaction ID: D213521
	Mailing Address 615 GLEN ST	Date of Disbursement 02 / 23 / 2009
	City Glens Falls State NY Zip Code 12801	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Candidate Name Scott Murphy	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 20	

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

23000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Access Capital, INC			Nature of Debt (Purpose): Door to Door-Get Out the Vote
Mailing Address 405 Park Ave			
City	State	ZIP Code	
New York	NY	10022	

Outstanding Balance Beginning This Period		Transaction ID: D212693	
2885.20			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	2885.20	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Sarah C. Donovan			Nature of Debt (Purpose): Door to Door, Get Out the Vote
Mailing Address 188 Atkins Street			
City	State	ZIP Code	
Meriden	CT	06450	

Outstanding Balance Beginning This Period		Transaction ID: D212702	
50.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	50.00	0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Downtown Whiting, LLC			Nature of Debt (Purpose): Rent
Mailing Address 310 Cooke Street			
City	State	ZIP Code	
Plainville	CT	06062	

Outstanding Balance Beginning This Period		Transaction ID: D212699	
350.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	350.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	▶	0.00
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daniel Griffin			Nature of Debt (Purpose): Door to Door, Get Out the Vote
Mailing Address 11 Daggett Drive			
City Meriden	State CT	ZIP Code 06450	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>		Transaction ID: D212698	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="50.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor LuAnn Griffin			Nature of Debt (Purpose): Door to Door, Get Out the Vote
Mailing Address 11 Dagget Dr.			
City Meriden	State CT	ZIP Code 06450	

Outstanding Balance Beginning This Period <input type="text" value="50.00"/>		Transaction ID: D212700	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="50.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Luis Lopez			Nature of Debt (Purpose): Door to Door, Get Out the Vote
Mailing Address 42 Pine Street #519			
City Waterbury	State CT	ZIP Code 06710	

Outstanding Balance Beginning This Period <input type="text" value="200.00"/>		Transaction ID: D212701	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="200.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 131 / 131	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Committee to Elect Chris Murphy

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ashley Torres			Nature of Debt (Purpose): Door to Door, Get Out the Vote
Mailing Address 85 Catherine Drive			
City Meriden	State CT	ZIP Code 06450	

Outstanding Balance Beginning This Period		Transaction ID: D212696	
50.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	50.00	0.00	

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	0.00