

**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

Simmons For Congress

ADDRESS (number and street)  
▼

P.O. Box 268 Drawer 271

☐Check if different  
than previously  
reported. (ACC)

Stonington

CT

06378

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00343921

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

CT

2

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

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

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2006

through

03

31

2006

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

Type or Print Name of Treasurer

Anne Simeone

Signature of Treasurer

Electronically Filed by Anne Simeone

Date

04

14

2006

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

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

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Simmons For Congress

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	222089.58	1350020.55
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	13874.49
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	222089.58	1336146.06
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	144928.48	664704.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	14369.37
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	144928.48	650334.79
8. Cash on Hand at Close of Reporting Period (from Line 27).....	893646.22	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

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

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

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name  
Simmons For Congress

Report Covering the Period:

From:

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

To:

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	107892.00	517804.16
(i) Itemized (use Schedule A).....	20912.00	98489.85
(ii) Unitemized.....	128804.00	616294.01
(iii) TOTAL of contributions from individuals..... ▶	3350.00	59580.96
(b) Political Party Committees.....	89935.58	674145.58
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	222089.58	1350020.55
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	13114.27	28392.89
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	14369.37
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	1222.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	235203.85	1394004.81

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	144928.48	664704.16
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	5000.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8874.49
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	13874.49
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	144928.48	678578.65

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	803370.85
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	235203.85
25. SUBTOTAL (add Line 23 and Line 24).....	1038574.70
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	144928.48
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	893646.22

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

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

FOR LINE NUMBER: PAGE 5 / 184

(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)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Glenn Arthur		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 10 Robin Hood Drive		<b>Transaction ID:</b> 60306.C35120
City Gales Ferry	State CT	Zip Code 06335
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) John Barrett		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 381 Highland Street		<b>Transaction ID:</b> 60131.C35030
City West Haven	State CT	Zip Code 06516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Barrett Outdoor Comm.	Occupation CEO	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Marion Bigelow-Wolfe		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 186 Jerry Brown Road #1316 Stoneridge		<b>Transaction ID:</b> 60331.C35714
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

825.00

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

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

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

FOR LINE NUMBER: PAGE 6 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Richard Booth

Mailing Address P.O. Box 187

City State Zip Code  
Pomfret Center CT 06259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60119.C34905

Amount of Each Receipt this Period

100.00

Receipt

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

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

Richard Booth

Mailing Address P.O. Box 187

City State Zip Code  
Pomfret Center CT 06259

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
325.00

Date of Receipt

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

Transaction ID: 60306.C35146

Amount of Each Receipt this Period

25.00

Receipt

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

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

Michael Botelho

Mailing Address 15 Pilgare Lane

City State Zip Code  
Glastonbury CT 06033

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Updike, Kelly & Spellacy

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
475.00

Date of Receipt

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

Transaction ID: 60330.C35555

Amount of Each Receipt this Period

125.00

Receipt

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

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

250.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Elizabeth Bresser

Mailing Address 60 Cross Road

City State Zip Code  
Waterford CT 06385

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
03 23 2006

Transaction ID: 60323.C35534

Amount of Each Receipt this Period

200.00

Receipt

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

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

Helen Brewster

Mailing Address 201 Al Harvey Road  
P.O. Box 469

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

M M / D D / Y Y Y Y  
03 23 2006

Transaction ID: 60323.C35528

Amount of Each Receipt this Period

1125.00

Receipt

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

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

William Brown

Mailing Address 348 River Road

City State Zip Code  
Pawcatuck CT 06379

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

262.00

Date of Receipt

M M / D D / Y Y Y Y  
02 06 2006

Transaction ID: 60306.C35156

Amount of Each Receipt this Period

100.00

Receipt

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

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

1425.00

**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 8 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Meredith Brown  
Mailing Address 79 Tipping Rock Road

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Debevoise & Plimpton

Occupation  
Attorney

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60323.C35480

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Van Brown  
Mailing Address 925 River Road

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wagner & Brown

Occupation  
Financial Consultant

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

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60306.C35189

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Steven Bunin  
Mailing Address P.O. Box 844

City State Zip Code  
Groton CT 06340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Optics Unlimited

Occupation  
Optician

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

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60331.C35592

Amount of Each Receipt this Period

100.00

Receipt

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

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

300.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mailing Address 395 Main Street

City State Zip Code  
Old Saybrook CT 06475

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60306.C35180

Amount of Each Receipt this Period

500.00

Receipt

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

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

John Casey

Mailing Address 48 Ice Pond Road

City State Zip Code  
Westerly RI 02891

FEC ID number of contributing federal political committee.

C

Name of Employer  
General DynamicsOccupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2050.00

Date of Receipt

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

Transaction ID: 60306.C35342

Amount of Each Receipt this Period

-250.00

Redesignation FROM Memo

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

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

John Casey

Mailing Address 48 Ice Pond Road

City State Zip Code  
Westerly RI 02891

FEC ID number of contributing federal political committee.

C

Name of Employer  
General DynamicsOccupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

Date of Receipt

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

Transaction ID: 60306.C35341

Amount of Each Receipt this Period

300.00

Receipt

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

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

800.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

A.

Full Name (Last, First, Middle Initial)

John Casey

Mailing Address 48 Ice Pond Road

City

Westerly

State

RI

Zip Code

02891

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
General Dynamics

Occupation

President

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

Date of Receipt

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

Transaction ID: 60306.C35343

Amount of Each Receipt this Period

250.00

Redesignation TO Memo

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ellen Chase

Mailing Address 96 Jonathan Drive

City

Vernon Rockville

State

CT

Zip Code

06066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60308.C35447

Amount of Each Receipt this Period

100.00

Receipt

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

C.

Full Name (Last, First, Middle Initial)

Raymond Cherenzia

Mailing Address P.O. Box 513

City

Westerly

State

RI

Zip Code

02891

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cherenzia & Associates

Occupation

Civil Engineer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.00

Date of Receipt

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

Transaction ID: 60330.C35635

Amount of Each Receipt this Period

60.00

Receipt

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

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

160.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Herbert Clark Mailing Address P.O. Box 995 City State Zip Code Essex CT 06426 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Clark Group Occupation Realtor Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35248 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Herbert Clark Mailing Address P.O. Box 995 City State Zip Code Essex CT 06426 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Clark Group Occupation Realtor Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35686 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Cooper Mailing Address P.O. Box 89 City State Zip Code North Stonington CT 06359 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Professor Occupation UCONN Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60118.C34965 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

850.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Patricia Copp		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 4 Money Point Road		<b>Transaction ID:</b> 60306.C35078
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Richard Dauphinais		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 826 Groton Long Point Road		<b>Transaction ID:</b> 60306.C35075
City Groton	State CT	Zip Code 06340
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 925.00	

<b>C.</b> Full Name (Last, First, Middle Initial) John DeCiantis		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address P.O. Box 229		<b>Transaction ID:</b> 60323.C35452
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Self-Employed	Occupation Building Contractor	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Debra Drouin		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 37 West Road		<b>Transaction ID:</b> 60118.C35003
City Clinton	State CT	Amount of Each Receipt this Period 200.00
Zip Code 06413		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Shoreline Insurance	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Nicholas Fanelli		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 9 Laurel Way Box 464		<b>Transaction ID:</b> 60118.C34952
City Norfolk	State CT	Amount of Each Receipt this Period 100.00
Zip Code 06058		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Raynard & Pierce	Occupation Insurance/Real Estate	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) David Fields		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 403 Babcock Hill Road		<b>Transaction ID:</b> 60306.C35092
City Lebanon	State CT	Amount of Each Receipt this Period 50.00
Zip Code 06249		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 292.00	

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Eric Filardi

Mailing Address 1 Dover Court

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F & F Dist. Inc.

Occupation

Beer Wholesaler

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60306.C35263

Amount of Each Receipt this Period

200.00

Receipt

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

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

Thomas Foley

Mailing Address 62 Khakum Wood Road

City State Zip Code  
Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T.B. Woods Corporation

Occupation

Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60306.C35430

Amount of Each Receipt this Period

-2100.00

Redesignation FROM Memo

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

[MEMO ITEM]

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

Thomas Foley

Mailing Address 62 Khakum Wood Road

City State Zip Code  
Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T.B. Woods Corporation

Occupation

Executive

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60306.C35431

Amount of Each Receipt this Period

2100.00

Redesignation TO Memo

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

[MEMO ITEM]

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

200.00

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

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

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

FOR LINE NUMBER: PAGE 15 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Thomas Foley

Mailing Address 62 Khakum Wood Road

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
T.B. Woods Corporation

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

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

Transaction ID: 60306.C35429

Amount of Each Receipt this Period

2200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Stephen Forbes

Mailing Address 62 Hurlbutt Road

City State Zip Code  
 Gales Ferry CT 06335

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

655.00

Date of Receipt

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

Transaction ID: 60306.C35172

Amount of Each Receipt this Period

5.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Robert Furek

Mailing Address 1370 Cutler Court

City State Zip Code  
 Marco Island FL 34145-5641

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 60330.C35567

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3205.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Elisha Gallup		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 81 Hyde Pond Court		<b>Transaction ID:</b> 60308.C35448
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer The Winthrop Group	Occupation Engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 375.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Alan Gardiner		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 717		<b>Transaction ID:</b> 60306.C35381
City Waterford	State CT	Zip Code 06385
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed	Occupation Real Estate	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Marc Ginsberg		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 108 Montauk Avenue		<b>Transaction ID:</b> 60118.C34992
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Self-Employed	Occupation Real Estate	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

1200.00

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



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

FOR LINE NUMBER: PAGE 17 / 184

(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)

Simmons For Congress

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

Edward Godfrey

Mailing Address 4 Gregory Place

City	State	Zip Code
Old Saybrook	CT	06475-2031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired
 Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 205.00

Date of Receipt

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

Transaction ID: 60306.C35223

Amount of Each Receipt this Period

50.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)

Frank Grandone

Mailing Address 43 Carriage Drive

City	State	Zip Code
Tolland	CT	06084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired
 Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 1100.00

Date of Receipt

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

Transaction ID: 60306.C35140

Amount of Each Receipt this Period

200.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)

Patrick Gratton

Mailing Address 3232 McKinney Avenue  
Lock Box 54

City	State	Zip Code
Dallas	TX	75204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Geologist
 Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 300.00

Date of Receipt

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

Transaction ID: 60306.C35366

Amount of Each Receipt this Period

100.00

Receipt

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

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

R. Nelson Griebel

Mailing Address 7 Caryn Lane

City State Zip Code  
Weatogue CT 06089

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Metro Hartford

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

01 / 18 / 2006

Transaction ID: 60119.C34911

Amount of Each Receipt this Period

250.00

Receipt

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

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

Peter Guille

Mailing Address 1020 Hartford Turnpike

City State Zip Code  
Waterford CT 06385

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pequot Properties

Occupation  
Realtor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

03 / 06 / 2006

Transaction ID: 60308.C35449

Amount of Each Receipt this Period

250.00

Receipt

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

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

Christopher Healy

Mailing Address 27 Dorchester Road

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Precinct 13 LLC

Occupation  
Political Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

03 / 06 / 2006

Transaction ID: 60306.C35357

Amount of Each Receipt this Period

100.00

Receipt

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

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy Healy Mailing Address 60 S Washington Street City Niantic State CT Zip Code 06357 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 362.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35205 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Paul Hickox Mailing Address 1000 Vicars Landing Way B-104 City Ponte Vedra Beach State FL Zip Code 32082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 662.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C34954 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Paul Hickox Mailing Address 1000 Vicars Landing Way B-104 City Ponte Vedra Beach State FL Zip Code 32082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 762.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35314 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		300.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 20 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
John Holstein  
Mailing Address 12 Roosevelt Avenue

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Developer

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

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60306.C35347

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
James Hurley  
Mailing Address 9 Hillyndale Road

City State Zip Code  
Storrs Mansfield CT 06268

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60306.C35116

Amount of Each Receipt this Period

50.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Kay Janney  
Mailing Address 97 Three Acre Road

City State Zip Code  
Groton CT 06340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

412.00

Date of Receipt

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

Transaction ID: 60306.C35242

Amount of Each Receipt this Period

200.00

Receipt

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

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Eads Johnson Mailing Address 135 Essex Meadows City Essex State CT Zip Code 06426 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 282.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35136 Amount of Each Receipt this Period 60.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Bruce Johnson Mailing Address 28 Avebury Berwick City Ledyard State CT Zip Code 06339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 155.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35182 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Bruce Johnson Mailing Address 28 Avebury Berwick City Ledyard State CT Zip Code 06339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 205.00		Date of Receipt MM / DD / YYYY 03 / 23 / 2006 <b>Transaction ID:</b> 60323.C35473 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

160.00

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

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

FOR LINE NUMBER: PAGE 22 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** William Keeney

Mailing Address 22 Riverhead Lane

City	State	Zip Code
East Lyme	CT	06333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shaletts CleanersOccupation  
Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60330.C35704

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Robert Klimek

Mailing Address 101 Cove Road

City	State	Zip Code
Old Lyme	CT	06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Shoreline Eye GroupOccupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60306.C35169

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Arthur Lifson

Mailing Address 5816 Linden Square Court

City	State	Zip Code
Rockville	MD	20852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Health Care Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60308.C35434

Amount of Each Receipt this Period

250.00

Receipt

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

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

750.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Arthur Lifson

Mailing Address 5816 Linden Square Court

City State Zip Code  
 Rockville MD 20852

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Health Care Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

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

Transaction ID: 60308.C35435

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Alicia MacArthur

Mailing Address 602 Foulkeways

City State Zip Code  
 Gwynedd PA 19436

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: 60306.C35216

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Alicia MacArthur

Mailing Address 602 Foulkeways

City State Zip Code  
 Gwynedd PA 19436

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

475.00

Date of Receipt

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

Transaction ID: 60330.C35579

Amount of Each Receipt this Period

100.00

Receipt

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

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

A. James Manafort

Mailing Address P.O. Box 99

City State Zip Code  
 Plainville CT 06062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Contractor

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60330.C35651

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Jack McGregor

Mailing Address 40 Anchorage Drive

City State Zip Code  
 Bridgeport CT 06605-3501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cohen & Wolf, P.C.

Occupation  
Attorney/Developer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60306.C35105

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. William McGurk

Mailing Address 21 Still Meadow Lane

City State Zip Code  
 Somers CT 06071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockville Bank

Occupation  
Banker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

155.00

Date of Receipt

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

Transaction ID: 60306.C35125

Amount of Each Receipt this Period

100.00

Receipt

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

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

1350.00

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



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

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

FOR LINE NUMBER: PAGE 25 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mailing Address 21 Still Meadow Lane

City State Zip Code  
Somers CT 06071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rockville Bank

Occupation  
Banker

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

Election Cycle-to-Date ▼  
405.00

Date of Receipt

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

Transaction ID: 60323.C35496

Amount of Each Receipt this Period

250.00

Receipt

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

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

Mailing Address 346 Quarry Hill Road

City State Zip Code  
East Hampton CT 06424

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
237.62

Date of Receipt

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

Transaction ID: 60306.C35260

Amount of Each Receipt this Period

75.00

Receipt

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

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

Mailing Address 63 E. Shore Drive

City State Zip Code  
Niantic CT 06357

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: 60306.C35244

Amount of Each Receipt this Period

100.00

Receipt

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

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

John Miller

Mailing Address 1137 Silas Deane Highway

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Close, Jensen and Miller  
PC

Occupation  
Engineer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
02 06 2006

Transaction ID: 60306.C35047

Amount of Each Receipt this Period

150.00

Receipt

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

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

John Miller

Mailing Address 1137 Silas Deane Highway

City State Zip Code  
Wethersfield CT 06109

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Close, Jensen and Miller  
PC

Occupation  
Engineer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y  
03 30 2006

Transaction ID: 60330.C35642

Amount of Each Receipt this Period

1000.00

Receipt

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

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

William Morris

Mailing Address 5 Broad Street

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
01 18 2006

Transaction ID: 60118.C34967

Amount of Each Receipt this Period

500.00

Receipt

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

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

1650.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Carol Nedobity Mailing Address 22 Glen Grove Road City State Zip Code Deep River CT 06417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 215.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35225 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Carol Nedobity Mailing Address 22 Glen Grove Road City State Zip Code Deep River CT 06417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35486 Amount of Each Receipt this Period 25.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Frederick Nicholas Mailing Address 21 High Street City State Zip Code Stonington CT 06378 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35392 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

150.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Harrison Noyes		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 186 Jerry Brown Road Unit 3312		<b>Transaction ID:</b> 60323.C35521
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1462.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Alfred Ogden		Date of Receipt M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address C/O Cascone, Cone, & Collyer 711 Third Avenue-Suite 1505		<b>Transaction ID:</b> 60118.C34985
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Anna Maria Palmer		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 85 Main Street P.O. Box 728		<b>Transaction ID:</b> 60306.C35352
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

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

1200.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

Stephen Percy

Mailing Address 14 New Shore Road

City

Waterford

State

CT

Zip Code

06385

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pequot Properties

Occupation

Real Estate Broker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: 60306.C35280

Amount of Each Receipt this Period

100.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Virginia Rhodes

Mailing Address 267 Grassy Hill Road

City

Lyme

State

CT

Zip Code

06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Social Worker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C34963

Amount of Each Receipt this Period

300.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

John Ringelberg

Mailing Address 36 Covese Lane

City

Stonington

State

CT

Zip Code

06378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JMS Naval Architects

Occupation

President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60323.C35531

Amount of Each Receipt this Period

200.00

Receipt

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

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

600.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Marguerite Riordan

Mailing Address 8 Pearl Street

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Antique Dealer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 18 2006

Transaction ID: 60119.C34906

Amount of Each Receipt this Period

400.00

Receipt

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

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

Christopher Rixon

Mailing Address 17 Lema Drive

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Real Estate Developer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60306.C35353

Amount of Each Receipt this Period

100.00

Receipt

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

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

Lewis Rome

Mailing Address 1 State State 13th Floor

City State Zip Code  
Hartford CT 06103

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Government Relations

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 30 2006

Transaction ID: 60330.C35720

Amount of Each Receipt this Period

1000.00

Receipt

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

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

1500.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Lawrence Sarni		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 116 Case Street		<b>Transaction ID:</b> 60118.C34941
City Norwich	State CT	Zip Code 06360
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 502.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Lawrence Sarni		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 116 Case Street		<b>Transaction ID:</b> 60306.C35310
City Norwich	State CT	Zip Code 06360
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 552.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Seery		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 25 Quailcrest Road		<b>Transaction ID:</b> 60306.C35266
City East Lyme	State CT	Zip Code 06333
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer State of CT	Occupation State Trooper	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

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

1150.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Gail Slicer		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 561 Hartford Turnpike		<b>Transaction ID:</b> 60306.C35106
City Vernon Rockville	State CT	Zip Code 06066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Self-Employed	Occupation Tax Preparer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) A. Tappen Soper		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 75 Beaver Brook Road		<b>Transaction ID:</b> 60118.C34999
City Old Lyme	State CT	Zip Code 06371
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1312.00	

<b>C.</b> Full Name (Last, First, Middle Initial) William Spicer		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 9153		<b>Transaction ID:</b> 60306.C35243
City Groton	State CT	Zip Code 06340
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2050.00
Name of Employer Spicer Marina	Occupation Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

**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)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Roy Springer Mailing Address 694 Shewville Road P.O. Box 442 City Ledyard State CT Zip Code 06339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 362.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35296 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Duncan Stoddard Mailing Address 255 Neptune Drive City Groton State CT Zip Code 06340 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Chelsea Groton Savings Bank Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35499 Amount of Each Receipt this Period 200.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) David Stryker Mailing Address P.O. Box 488 City Mystic State CT Zip Code 06355 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Merrill Lynch Occupation Financial Consultant Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 337.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35290 Amount of Each Receipt this Period 175.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

475.00

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

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

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

David Stryker

Mailing Address P.O. Box 488

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Merrill Lynch

Occupation  
Financial Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

437.00

Date of Receipt

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

Transaction ID: 60306.C35295

Amount of Each Receipt this Period

100.00

Receipt

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

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

David Stryker

Mailing Address P.O. Box 488

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Merrill Lynch

Occupation  
Financial Consultant

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

537.00

Date of Receipt

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

Transaction ID: 60306.C35413

Amount of Each Receipt this Period

100.00

Receipt

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

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

You Sung Sang

Mailing Address 27 Sandpiper Lane

City State Zip Code  
East Lyme CT 06333

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Norwich GI Associates

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

367.00

Date of Receipt

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

Transaction ID: 60306.C35179

Amount of Each Receipt this Period

5.00

Receipt

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

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

205.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Michael Toner

Mailing Address 23 Niles Road

City State Zip Code  
 Mystic CT 06355

FEC ID number of contributing federal political committee.

C

Name of Employer  
General DynamicsOccupation  
Vice President Marine

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60330.C35683

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Robert Valenti

Mailing Address P.O. Box 10

City State Zip Code  
 Mystic CT 06355

FEC ID number of contributing federal political committee.

C

Name of Employer  
Valenti FordOccupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60306.C35409

Amount of Each Receipt this Period

250.00

Receipt

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

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

Robert Vincent

Mailing Address 112 County Home Road

City State Zip Code  
 Thompson CT 06277

FEC ID number of contributing federal political committee.

C

Name of Employer  
David Clark Co.Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 60306.C35114

Amount of Each Receipt this Period

100.00

Receipt

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

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

1350.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

Jeffrey Walker

Mailing Address 360 New Canaan Road

City State Zip Code  
 Wilton CT 06897

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chase Manhattan Corp.

Occupation  
Vice Chairman

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

Election Cycle-to-Date ▼

4175.00

Date of Receipt

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

Transaction ID: 60330.C35685

Amount of Each Receipt this Period

800.00

Receipt

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

**B.**

Full Name (Last, First, Middle Initial)

Frank Whelan

Mailing Address 61 Harbor Street

City State Zip Code  
 Branford CT 06405

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
State of CT

Occupation  
Professor

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

Election Cycle-to-Date ▼

255.00

Date of Receipt

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

Transaction ID: 60306.C35152

Amount of Each Receipt this Period

100.00

Receipt

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

**C.**

Full Name (Last, First, Middle Initial)

Robert Whittemore

Mailing Address P.O. Box 827  
 1814 Middlebury Road

City State Zip Code  
 Middlebury CT 06762

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60306.C35261

Amount of Each Receipt this Period

200.00

Receipt

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

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

1100.00

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

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

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(check only one)

<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)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ellsworth Williams Mailing Address 27 Noble Avenue City Noank State CT Zip Code 06340-5624 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 267.00	Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35098 Amount of Each Receipt this Period 25.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Ellsworth Williams Mailing Address 27 Noble Avenue City Noank State CT Zip Code 06340-5624 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 297.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35479 Amount of Each Receipt this Period 30.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Mark Wolman Mailing Address 914 Hartford Turnpike P.O. Box 535 City Waterford State CT Zip Code 06385 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Developer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2700.00	Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35647 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....**1055.00****TOTAL** This Period (last page this line number only) .....

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mark Wolman Mailing Address 914 Hartford Turnpike P.O. Box 535 City Waterford State CT Zip Code 06385 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Developer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35654 Amount of Each Receipt this Period -600.00 Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Wolman Mailing Address 914 Hartford Turnpike P.O. Box 535 City Waterford State CT Zip Code 06385 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Developer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2700.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35655 Amount of Each Receipt this Period 600.00 Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Len Wolman Mailing Address 190 Niantic River Road City Waterford State CT Zip Code 06385 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Waterford Group Occupation CEO Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2800.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35652 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1000.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Len Wolman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 190 Niantic River Road		<b>Transaction ID:</b> 60330.C35653
City Waterford	State CT	Zip Code 06385
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -700.00
Name of Employer Waterford Group	Occupation CEO	Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Len Wolman		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 190 Niantic River Road		<b>Transaction ID:</b> 60330.C35656
City Waterford	State CT	Zip Code 06385
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700.00
Name of Employer Waterford Group	Occupation CEO	Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2800.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Albert Glassenberg		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 994 Ocean Avenue		<b>Transaction ID:</b> 60306.C35077
City New London	State CT	Zip Code 06320
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Albert Glassenberg

Mailing Address 994 Ocean Avenue

City State Zip Code  
 New London CT 06320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60323.C35494

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** L. Richardson

Mailing Address 7 Indian Spring Road

City State Zip Code  
 Norwalk CT 06853

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self-Employed

Occupation  
Small Business Owner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 8 / 2 0 0 6

Transaction ID: 60119.C34903

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Angie Henrichon

Mailing Address 138 Killingly Avenue

City State Zip Code  
 Putnam CT 06260

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C35011

Amount of Each Receipt this Period

200.00

Receipt

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

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

900.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Alysson Ravosa Mailing Address 77 Chatham Hill City State Zip Code South Glastonbury CT 06073 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		Date of Receipt MM / DD / YYYY 03 / 23 / 2006 <b>Transaction ID:</b> 60330.C35546 Amount of Each Receipt this Period 850.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Repeta Mailing Address 40 Oak Bluff City State Zip Code Avon CT 06001 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 23 / 2006 <b>Transaction ID:</b> 60330.C35560 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Anagnos Mailing Address 321 Clark Hill Road City State Zip Code South Glastonbury CT 06073 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer City Fish Occupation Owner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 03 / 23 / 2006 <b>Transaction ID:</b> 60330.C35548 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1850.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Gerald Noonan  
Mailing Address 167 Kingswood Drive

City State Zip Code  
Naugatuck CT 06770

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CBA Bank

Occupation  
President

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

Election Cycle-to-Date ▼  
250.00

Date of Receipt

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

Transaction ID: 60323.C35498

Amount of Each Receipt this Period

250.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Sandra David  
Mailing Address 25 Suffield Court

City State Zip Code  
Cheshire CT 06410-1862

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ADF Industries, Inc.

Occupation  
Executive

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60131.C35037

Amount of Each Receipt this Period

300.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
William Steere  
Mailing Address 54 Island Drive

City State Zip Code  
Rye NY 10580

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
2100.00

Date of Receipt

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

Transaction ID: 60330.C35721

Amount of Each Receipt this Period

2100.00

Receipt

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

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

2650.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Edward Lorenz Mailing Address 7 Lorenz Parkway City Ledyard State CT Zip Code 06339 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Construction Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1050.00			Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35644 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) David Chapman Mailing Address 19 Jenda Way City Madison State CT Zip Code 06443 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Blakeslee, Arpaia Chapman Occupation Engineer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00			Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35062 Amount of Each Receipt this Period 300.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Carl Johnson Mailing Address 75 Mooreland Road City Kensington State CT Zip Code 06037-1119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Berlin Steel Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00			Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60119.C34904 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Carl Johnson Mailing Address 75 Mooreland Road City Kensington State CT Zip Code 06037-1119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Berlin Steel Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35051 Amount of Each Receipt this Period 150.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Carl Johnson Mailing Address 75 Mooreland Road City Kensington State CT Zip Code 06037-1119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Berlin Steel Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1350.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35646 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) J.E. Arborio Mailing Address 231 Shunpike Road City Cromwell State CT Zip Code 06416 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Charter Oak Utility Occupation Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 270.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35055 Amount of Each Receipt this Period 150.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		1300.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 45 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Jackson Kemper

Mailing Address 2600 Virginia Avenue NW

City State Zip Code  
 Washington DC 20037

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Kemper Co.

Occupation  
President

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

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

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

Transaction ID: 60401.C35787

Amount of Each Receipt this Period

1000.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Timothy Hyatt

Mailing Address 135-2 Warsaw Street

City State Zip Code  
 Deep River CT 06417

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
American Medical Response

Occupation  
Paramedic

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

Election Cycle-to-Date ▼  
 600.00

Date of Receipt

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

Transaction ID: 60306.C35356

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Dawn Schieferdecker

Mailing Address 135-2 Warsaw Street

City State Zip Code  
 Deep River CT 06417

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Essex Island Marina

Occupation  
Dockmaster

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

Election Cycle-to-Date ▼  
 1100.00

Date of Receipt

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

Transaction ID: 60306.C35355

Amount of Each Receipt this Period

100.00

Receipt

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

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

1200.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Crocker		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60118.C35002
Mailing Address 64 Pepperbox Road		Amount of Each Receipt this Period 200.00
City Waterford	State CT	Zip Code 06385
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Crocker's Boatyard, Inc.	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert Jordan		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35135
Mailing Address 337 Saw Mill Hill Road		Amount of Each Receipt this Period 10.00
City Sterling	State CT	Zip Code 06377
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 210.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Thomas Brady		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60118.C35017
Mailing Address 25 Bright Hill Drive		Amount of Each Receipt this Period 250.00
City Clinton	State CT	Zip Code 06413-1801
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Self-Employed	Occupation Dentist	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

460.00

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

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

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

FOR LINE NUMBER: PAGE 47 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Caron Mailing Address 33 Babbitt Hill Road City Pomfret Center State CT Zip Code 06259 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Dentist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C35021 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Mooney Mailing Address 227 Pomfret Street City Putnam State CT Zip Code 06260 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Dentist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C35018 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Walter McGinn Mailing Address 51 Taft Pond Road City Pomfret Center State CT Zip Code 06259 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Dentist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 100.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C34929 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		700.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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

FOR LINE NUMBER: PAGE 48 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Walter McGinn Mailing Address 51 Taft Pond Road City Pomfret Center State CT Zip Code 06259 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Dentist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00			Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35099 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Desrosiers Mailing Address 63 Anderson Road City Pomfret Center State CT Zip Code 06259 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed Occupation Dentist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00			Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C35012 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) L. George Rieger Mailing Address 28 Home Place Unit C2 City Greenwich State CT Zip Code 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Hamlin Capital Management Occupation Capitalist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4000.00			Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35122 Amount of Each Receipt this Period 2000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2600.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
L. George Rieger  
Mailing Address 28 Home Place Unit C2

City State Zip Code  
Greenwich CT 06830

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hamlin Capital ManagementOccupation  
Capitalist

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

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60306.C35124

Amount of Each Receipt this Period

1900.00

Redesignation TO Memo

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

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
L. George Rieger  
Mailing Address 28 Home Place Unit C2

City State Zip Code  
Greenwich CT 06830

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hamlin Capital ManagementOccupation  
Capitalist

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

Election Cycle-to-Date ▼

4000.00

Date of Receipt

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

Transaction ID: 60306.C35123

Amount of Each Receipt this Period

-1900.00

Redesignation FROM Memo

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

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Leonard Czuba  
Mailing Address 27 Montauk Avenue

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

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

Election Cycle-to-Date ▼

575.00

Date of Receipt

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

Transaction ID: 60306.C35157

Amount of Each Receipt this Period

175.00

Receipt

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

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

175.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mailing Address 27 Montauk Avenue

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
625.00

Date of Receipt

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

Transaction ID: 60306.C35383

Amount of Each Receipt this Period

50.00

Receipt

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

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

Mailing Address 356 Essex Meadows

City State Zip Code  
Essex CT 06426-1526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
800.00

Date of Receipt

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

Transaction ID: 60306.C35252

Amount of Each Receipt this Period

400.00

Receipt

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

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

Mailing Address 356 Essex Meadows

City State Zip Code  
Essex CT 06426-1526

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
1300.00

Date of Receipt

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

Transaction ID: 60308.C35439

Amount of Each Receipt this Period

500.00

Receipt

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

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

950.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Robert Featherstone  
Mailing Address 67 Holmes Road

City State Zip Code  
Ridgefield CT 06877

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
190.00

Date of Receipt

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

Transaction ID: 60306.C35232

Amount of Each Receipt this Period

35.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Robert Featherstone  
Mailing Address 67 Holmes Road

City State Zip Code  
Ridgefield CT 06877

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
225.00

Date of Receipt

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

Transaction ID: 60323.C35450

Amount of Each Receipt this Period

35.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Gordon Gibson  
Mailing Address 836 Hartford Turnpike

City State Zip Code  
Vernon Rockville CT 06066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C34953

Amount of Each Receipt this Period

300.00

Receipt

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

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

370.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Gordon Gibson		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 836 Hartford Turnpike		<b>Transaction ID:</b> 60306.C35277
City Vernon Rockville	State CT	Zip Code 06066
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Doris Trowbridge		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 6 South Street Extension		<b>Transaction ID:</b> 60119.C34919
City Willimantic	State CT	Zip Code 06226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 224.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Doris Trowbridge		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 6 South Street Extension		<b>Transaction ID:</b> 60118.C34966
City Willimantic	State CT	Zip Code 06226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 62.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 286.00	

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

412.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Doris Trowbridge  
Mailing Address 6 South Street Extension

City State Zip Code  
Willimantic CT 06226

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
361.00

Date of Receipt

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

Transaction ID: 60306.C35273

Amount of Each Receipt this Period

75.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Thomas Vivirito  
Mailing Address 103 South Road

City State Zip Code  
Groton CT 06340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fleet Motor Co. LLC

Occupation  
Owner

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

Election Cycle-to-Date ▼  
275.00

Date of Receipt

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

Transaction ID: 60306.C35111

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Irene Tibus  
Mailing Address 322 Montauk Avenue

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Majestic Jewelers

Occupation  
Owner

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

Election Cycle-to-Date ▼  
525.00

Date of Receipt

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

Transaction ID: 60306.C35350

Amount of Each Receipt this Period

175.00

Receipt

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

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

James Byrnes

Mailing Address 77 Cady Lane

City State Zip Code  
 Woodstock CT 06281

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Byrnes Agency

Occupation  
Insurance Agent

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

Election Cycle-to-Date ▼  
 650.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C34896

Amount of Each Receipt this Period

150.00

Receipt

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

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

Kathryn Burton

Mailing Address Box 759  
 38 Pattagansett Drive

City State Zip Code  
 East Lyme CT 06333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation  
Writer

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

Election Cycle-to-Date ▼  
 1100.00

Date of Receipt

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

Transaction ID: 60306.C35428

Amount of Each Receipt this Period

300.00

Receipt

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

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

James McAnally

Mailing Address 52 High Ridge Drive

City State Zip Code  
 Pawcatuck CT 06379

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Service Master

Occupation  
Owner

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

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

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

Transaction ID: 60323.C35517

Amount of Each Receipt this Period

100.00

Receipt

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

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 55 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Linda Demas Mailing Address 8 Ridge Drive South City State Zip Code Old Saybrook CT 06475 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Psychiatrist Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35302 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Brooks Mailing Address 37 Prospect Street City State Zip Code Mystic CT 06355 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New London Development Co-rp. Occupation Waterfront Development Mgr. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 162.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60119.C34899 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) John Brooks Mailing Address 37 Prospect Street City State Zip Code Mystic CT 06355 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New London Development Co-rp. Occupation Waterfront Development Mgr. Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 262.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35289 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

300.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Rheo Brouillard		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 306 Kenyon Road		<b>Transaction ID:</b> 60323.C35497
City Hampton	State CT	Zip Code 06247
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Savings Institute	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Vincent Yevoli		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 82 Mechanic Street		<b>Transaction ID:</b> 60306.C35293
City Pawcatuck	State CT	Zip Code 06379
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Yardney Inc.	Occupation General Manager	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Vincent Yevoli		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 82 Mechanic Street		<b>Transaction ID:</b> 60306.C35346
City Pawcatuck	State CT	Zip Code 06379
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Yardney Inc.	Occupation General Manager	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 900.00	

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

550.00

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



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

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

FOR LINE NUMBER: PAGE 57 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Douglas Teeson  
Mailing Address 39 Glenwood Avenue

City State Zip Code  
New London CT 06320-4152

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mystic Seaport

Occupation  
CEO

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

Election Cycle-to-Date ▼  
300.00

Date of Receipt

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

Transaction ID: 60306.C35134

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
John Nazzaro  
Mailing Address 13 Timberridge Road

City State Zip Code  
Pawcatuck CT 06379-1241

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

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

Election Cycle-to-Date ▼  
200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C35001

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
Nedenia Hartley  
Mailing Address P.O. Box 817

City State Zip Code  
Purchase NY 10577-0817

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Actress

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

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60306.C35044

Amount of Each Receipt this Period

500.00

Receipt

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

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 58 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mailing Address 82 Lofgren Road

City State Zip Code  
Avon CT 06001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Hartford

Occupation  
Executive

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

Election Cycle-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 06 / 2006

Transaction ID: 60306.C35373

Amount of Each Receipt this Period

100.00

Receipt

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

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

Mailing Address 123 Bluff Point Road

City State Zip Code  
South Glastonbury CT 06073

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LeBouef Lamb Greene & Mac-  
Rae

Occupation  
Attorney

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

Election Cycle-to-Date ▼  
 2100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2006

Transaction ID: 60330.C35696

Amount of Each Receipt this Period

850.00

Receipt

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

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

Mailing Address 95-A Airline Road  
P.O. Box 194

City State Zip Code  
Clinton CT 06413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
F.J. Dahill Co.

Occupation  
Estimator

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

Election Cycle-to-Date ▼  
 200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2006

Transaction ID: 60330.C35673

Amount of Each Receipt this Period

100.00

Receipt

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

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

1050.00

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

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

FOR LINE NUMBER: PAGE 59 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Arborio		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 147 Robeth Lane		Transaction ID: 60306.C35057
City Wethersfield	State CT	Zip Code 06109-3553
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Arborio Corporation	Occupation Engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 150.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Peter Arborio		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 147 Robeth Lane		Transaction ID: 60306.C35288
City Wethersfield	State CT	Zip Code 06109-3553
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Arborio Corporation	Occupation Engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Magnus Gustafsson		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 253 Putnam Road		Transaction ID: 60330.C35581
City New Canaan	State CT	Zip Code 06840
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Coldwater Seafood	Occupation President	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Jeffrey Phelon

Mailing Address 165 Grier Road

City State Zip Code  
 Vernon Rockville CT 06066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CNA Insurance Company

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60306.C35396

Amount of Each Receipt this Period

50.00

Receipt

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

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

Jeffrey Phelon

Mailing Address 165 Grier Road

City State Zip Code  
 Vernon Rockville CT 06066

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CNA Insurance Company

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60330.C35710

Amount of Each Receipt this Period

50.00

Receipt

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

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

Merrily Lyon

Mailing Address 564 Taugwonk Road

City State Zip Code  
 Stonington CT 06378-1809

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

272.00

Date of Receipt

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

Transaction ID: 60306.C35087

Amount of Each Receipt this Period

175.00

Receipt

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

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

275.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

A. Scott Salisbury

Mailing Address 123 Brooklyn Road

City State Zip Code  
 Canterbury CT 06331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Securitas

Occupation  
System Administrator

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60330.C35692

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Christopher Salafia

Mailing Address 3 Rebecca Lane

City State Zip Code  
 Killingworth CT 06419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Powerphone, Inc.

Occupation  
Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

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

Transaction ID: 60330.C35658

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. John Eagan

Mailing Address 37 West Road

City State Zip Code  
 Clinton CT 06413

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Town of Clinton

Occupation  
Police Officer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C35004

Amount of Each Receipt this Period

200.00

Receipt

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 62 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Harry Boardsen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 2 Elizabeth Court		<b>Transaction ID:</b> 60330.C35569
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -1400.00
Name of Employer HK Boardsen LLC	Occupation President	Redesignation FROM Memo
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Harry Boardsen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 2 Elizabeth Court		<b>Transaction ID:</b> 60330.C35568
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3000.00
Name of Employer HK Boardsen LLC	Occupation President	Receipt
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b> Full Name (Last, First, Middle Initial) Harry Boardsen		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 2 Elizabeth Court		<b>Transaction ID:</b> 60330.C35570
City Mystic	State CT	Zip Code 06355
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1400.00
Name of Employer HK Boardsen LLC	Occupation President	Redesignation TO Memo
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>

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

3000.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Peter Cimini		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 168 Ridgewood Drive		<b>Transaction ID:</b> 60323.C35545
City Rocky Hill	State CT	Zip Code 06067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Laurie Paternoster		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 48 Chatham Hill		<b>Transaction ID:</b> 60323.C35459
City South Glastonbury	State CT	Zip Code 06073
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Business Data Systems	Occupation Owner	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 700.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Steven Ryder		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 17 Rockledge Drive		<b>Transaction ID:</b> 60306.C35250
City Madison	State CT	Zip Code 06443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Pfizer	Occupation Pharmaceutical R&D	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 200.00	

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

550.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 64 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Frederick Crosby

Mailing Address 19 Binney Road

City State Zip Code  
 Old Lyme CT 06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60323.C35482

Amount of Each Receipt this Period

300.00

Receipt

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

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

Peter Legnos

Mailing Address 356 West Shore Avenue

City State Zip Code  
 Groton CT 06340

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LBI Inc.

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: 60306.C35192

Amount of Each Receipt this Period

600.00

Receipt

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

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

David Christian

Mailing Address 204 Trumpet Road

City State Zip Code  
 Smithfield VA 23430

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dominion Energy

Occupation  
Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60306.C35382

Amount of Each Receipt this Period

500.00

Receipt

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

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

1400.00

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



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

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

FOR LINE NUMBER: PAGE 65 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ronald Defeo Mailing Address 45 Beachside Avenue City State Zip Code Westport CT 06880 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Terex Corporation Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35491 Amount of Each Receipt this Period 2100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Brian Klee Mailing Address 491 Gold Star Highway Suite 210 City State Zip Code Groton CT 06340 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Eastern CT Dermatology Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35320 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Joan Reuter Mailing Address 9 Homestead Drive City State Zip Code Enfield CT 06082 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35141 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**3200.00**

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

A. Joan Reuter

Mailing Address 9 Homestead Drive

City State Zip Code  
 Enfield CT 06082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60330.C35628

Amount of Each Receipt this Period

50.00

Receipt

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

Full Name (Last, First, Middle Initial)

B. Brian OBrien

Mailing Address P.O. Box 448

City State Zip Code  
 Quinebaug CT 06262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

337.00

Date of Receipt

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

Transaction ID: 60306.C35112

Amount of Each Receipt this Period

100.00

Receipt

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

Full Name (Last, First, Middle Initial)

C. Brian OBrien

Mailing Address P.O. Box 448

City State Zip Code  
 Quinebaug CT 06262

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

437.00

Date of Receipt

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

Transaction ID: 60330.C35712

Amount of Each Receipt this Period

100.00

Receipt

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

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

250.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Henry Amdur Mailing Address 275 Old Black Point Road City Niantic State CT Zip Code 06357 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Thames Gynecology Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35707 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Thomas Peterffy Mailing Address Interactive Brokers Group 1 Pickwick Plaza City Greenwich State CT Zip Code 06830 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Interactive Brokers Group Occupation Chairman Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C34989 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Anthony Wise Mailing Address 47 Lathrop Avenue City Pawcatuck State CT Zip Code 06379 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 367.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35269 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2050.00

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

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

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

FOR LINE NUMBER: PAGE 68 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Owen Devereux		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60118.C34970
Mailing Address 99 Summit Road		Amount of Each Receipt this Period 50.00
City Storrs Mansfield	State CT	Zip Code 06268-1421
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 155.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Owen Devereux		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35299
Mailing Address 99 Summit Road		Amount of Each Receipt this Period 50.00
City Storrs Mansfield	State CT	Zip Code 06268-1421
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 205.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Richard Coveney		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35623
Mailing Address 201 Regan Road Apt. 2B		Amount of Each Receipt this Period 30.00
City Vernon Rockville	State CT	Zip Code 06066-2833
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 255.00	

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

130.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Albert Rizzo Mailing Address 388 Stamm Road City State Zip Code Newington CT 06111 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Rizzo Pool Co. Occupation Owner Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35717 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Edward Giering Mailing Address 47 Long Hill Road City State Zip Code Clinton CT 06413-1840 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35301 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Richard Fedor Mailing Address 66 Wylie School Road City State Zip Code Voluntown CT 06384 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer State of CT Occupation Liquor Agent Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1075.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35340 Amount of Each Receipt this Period 25.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

225.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Allyn Brown Mailing Address 57 North West Corner Road City State Zip Code Preston CT 06365 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60118.C34898 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Edward Katz Mailing Address 15 Rockyfield Road City State Zip Code Westport CT 06880-2202 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Cashman & Katz Occupation Advertising Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35472 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Virginia Hughes Mailing Address 10 White Pine Lane City State Zip Code W Hartford CT 06107 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35257 Amount of Each Receipt this Period 100.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Paul Bibeau		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35691
Mailing Address 8 Back Acres Way		Amount of Each Receipt this Period 200.00
City Stonington	State CT	Zip Code 06378
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 550.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Vincent Palazzo		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35095
Mailing Address 58 Marbern Drive		Amount of Each Receipt this Period 50.00
City Suffield	State CT	Zip Code 06078
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 229.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Vincent Palazzo		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35484
Mailing Address 58 Marbern Drive		Amount of Each Receipt this Period 50.00
City Suffield	State CT	Zip Code 06078
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Retired	Occupation Retired	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 279.00	

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

300.00

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

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

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

FOR LINE NUMBER: PAGE 72 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ernest Brown Mailing Address 43 Jordan Road City Willimantic State CT Zip Code 06226 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 362.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35615 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Roger Loeb Mailing Address 26 Ferncliff Drive City W Hartford State CT Zip Code 06117 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Liquor Distributor Occupation Allan Goodman Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35637 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Prout Mailing Address 89 Boulder Drive City Rocky Hill State CT Zip Code 06067-4238 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Alpha Q, Inc. Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35171 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

400.00

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



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

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

FOR LINE NUMBER: PAGE 73 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) June Willson Mailing Address 446-16 Main Street City State Zip Code Old Saybrook CT 06475 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 650.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35173 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Lloyd Sugarman Mailing Address 87 Hoffman Avenue City State Zip Code Cranston RI 02920 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Johnny Rockets Occupation Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35649 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) William Smith Mailing Address 89 Muddy Brook Road City State Zip Code Ellington CT 06029-2119 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Robinson & Cole Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35641 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2200.00

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

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

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

FOR LINE NUMBER: PAGE 74 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Catherine Grant Mailing Address 159 Shetucket Turnpike City Voluntown State CT Zip Code 06384 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer L&M Hospital Occupation RN Manager Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35316 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Schmidt Mailing Address 499 Route 82 City Oakdale State CT Zip Code 06370 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Naval Undersea Warfare Occupation Computer Scientist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 350.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35209 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Fedak Mailing Address 655 Park Avenue 9-E City New York State NY Zip Code 10021 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4200.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2006 <b>Transaction ID:</b> 60306.C35412 Amount of Each Receipt this Period 2200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

2500.00

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

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

Use separate schedule(s)  
or each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Michael Fedak  
Mailing Address 655 Park Avenue 9-E

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

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

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

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

Transaction ID: 60331.C35738

Amount of Each Receipt this Period

2100.00

Redesignation TO Memo

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

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
Michael Fedak  
Mailing Address 655 Park Avenue 9-E

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

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

Election Cycle-to-Date ▼  
4200.00

Date of Receipt

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

Transaction ID: 60331.C35737

Amount of Each Receipt this Period

-2100.00

Redesignation FROM Memo

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

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
Michael Fedak  
Mailing Address 655 Park Avenue 9-E

City State Zip Code  
New York NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

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

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 0 5

Transaction ID: 823

Amount of Each Receipt this Period

2000.00

MEMO

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

[MEMO ITEM]

Supporting Info from Prev.  
Period

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

0.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mark Lopez

Mailing Address P.O. Box 336

City State Zip Code  
 Gales Ferry CT 06335-0336

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Optometrist

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1475.00

Date of Receipt

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

Transaction ID: 60306.C35174

Amount of Each Receipt this Period

175.00

Receipt

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

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

Louise Madsen

Mailing Address 143 River Road

City State Zip Code  
 Essex CT 06426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60323.C35465

Amount of Each Receipt this Period

100.00

Receipt

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

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

Thomas Rush

Mailing Address 27 Myrtle Road

City State Zip Code  
 Portland CT 06480-1643

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pratt & Whitney

Occupation  
Industrial Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: 60306.C35183

Amount of Each Receipt this Period

100.00

Receipt

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

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

375.00

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

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

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

FOR LINE NUMBER: PAGE 77 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Edward Collins  
Mailing Address 150 Mansfield Avenue

City State Zip Code  
Willimantic CT 06226

FEC ID number of contributing federal political committee.

C

Name of Employer  
CT Sports Medicine CenterOccupation  
Physician

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

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60119.C34918

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Nancy Schaeffer  
Mailing Address 222 Packer Road

City State Zip Code  
Mystic CT 06355

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

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

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60306.C35240

Amount of Each Receipt this Period

50.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
David Manke  
Mailing Address 10020 Chartwell Manor Court

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing federal political committee.

C

Name of Employer  
Pratt & WhitneyOccupation  
Executive

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

Election Cycle-to-Date ▼

2000.00

Date of Receipt

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

Transaction ID: 60330.C35684

Amount of Each Receipt this Period

500.00

Receipt

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

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

1050.00

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

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

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

FOR LINE NUMBER: PAGE 78 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

George Ouellette

Mailing Address 158 Pearl Street

City State Zip Code  
 Noank CT 06340

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60306.C35190

Amount of Each Receipt this Period

250.00

Receipt

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

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

Susan Heinemann

Mailing Address 54 Vauxhall Street

City State Zip Code  
 New London CT 06320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ethan Allen

Occupation  
Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

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

Transaction ID: 60306.C35076

Amount of Each Receipt this Period

100.00

Receipt

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

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

Susan Heinemann

Mailing Address 54 Vauxhall Street

City State Zip Code  
 New London CT 06320

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Ethan Allen

Occupation  
Manager

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

800.00

Date of Receipt

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

Transaction ID: 60306.C35073

Amount of Each Receipt this Period

250.00

Receipt

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

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

600.00

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

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

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

FOR LINE NUMBER: PAGE 79 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Eugene Fargeorge  
Mailing Address 69 Warwick Street

City State Zip Code  
New Haven CT 06513

FEC ID number of contributing federal political committee.

C

Name of Employer  
Knights Bridge Co.Occupation  
Manager

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

Election Cycle-to-Date ▼

562.00

Date of Receipt

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

Transaction ID: 60306.C35372

Amount of Each Receipt this Period

100.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
Estelle Zahn  
Mailing Address 49 North Main Street

City State Zip Code  
Essex CT 06426

FEC ID number of contributing federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60323.C35525

Amount of Each Receipt this Period

150.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
John OBrien  
Mailing Address 176 Water Street Apt. 1

City State Zip Code  
Stonington CT 06378

FEC ID number of contributing federal political committee.

C

Name of Employer  
OBrien,Shafner, et alOccupation  
Attorney

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

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60323.C35530

Amount of Each Receipt this Period

250.00

Receipt

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

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

500.00

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

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

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

FOR LINE NUMBER: PAGE 80 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Bell Mailing Address 91 Sheffield Street City State Zip Code Old Saybrook CT 06475 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Ocean Surveys, Inc. Occupation Scientist Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 600.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35074 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Elidad Jardines Mailing Address 34 Thompson Street City State Zip Code Fairfield CT 06825 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 371.00		Date of Receipt MM / DD / YYYY 03 / 06 / 2006 <b>Transaction ID:</b> 60306.C35384 Amount of Each Receipt this Period 60.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Giovanni Tomasi Mailing Address 19 Zeya Drive City State Zip Code Coventry CT 06238 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Skyler Technologies Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35089 Amount of Each Receipt this Period 50.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

210.00

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



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

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

FOR LINE NUMBER: PAGE 81 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Giovanni Tomasi

Mailing Address 19 Zeya Drive

City State Zip Code  
 Coventry CT 06238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Skyler Technologies

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

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

Transaction ID: 60330.C35718

Amount of Each Receipt this Period

100.00

Receipt

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

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

Mary Sargent

Mailing Address 25 Colony Road

City State Zip Code  
 W Hartford CT 06117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

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

Transaction ID: 60323.C35454

Amount of Each Receipt this Period

100.00

Receipt

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

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

James Ouellette

Mailing Address 7 Hickory Court

City State Zip Code  
 Colchester CT 06415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ProHealth Physicians

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C34958

Amount of Each Receipt this Period

50.00

Receipt

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

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

250.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

James Ouellette

Mailing Address 7 Hickory Court

City State Zip Code  
 Colchester CT 06415

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ProHealth Physicians

Occupation  
Physician

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60306.C35318

Amount of Each Receipt this Period

50.00

Receipt

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

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

Scott Perry

Mailing Address 33 Overlook Farms Road

City State Zip Code  
 Killingworth CT 06419

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cahill, Goetsch & Maruer

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1225.00

Date of Receipt

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

Transaction ID: 60323.C35544

Amount of Each Receipt this Period

250.00

Receipt

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

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

Nancy Rieger

Mailing Address 28 Home Place Unit C2

City State Zip Code  
 Greenwich CT 06830

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2350.00

Date of Receipt

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

Transaction ID: 60306.C35126

Amount of Each Receipt this Period

2000.00

Receipt

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

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

2300.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nancy Rieger		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 28 Home Place Unit C2		<b>Transaction ID:</b> 60306.C35127
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -250.00
Name of Employer Retired	Occupation Retired	Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2350.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Nancy Rieger		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6
Mailing Address 28 Home Place Unit C2		<b>Transaction ID:</b> 60306.C35128
City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Anthony Cashman		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 64 Far Hills Drive		<b>Transaction ID:</b> 60323.C35471
City Avon	State CT	Zip Code 06001
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Cashman & Katz	Occupation Advertising	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

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

250.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Sebastian Amenta

Mailing Address 1166 Woodruff Street

City State Zip Code  
 Southington CT 06489

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Maguire Group

Occupation  
Engineer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: 60330.C35554

Amount of Each Receipt this Period

125.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** John Lord

Mailing Address 78 Jeremiahs Way

City State Zip Code  
 South Glastonbury CT 06073

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: 60330.C35557

Amount of Each Receipt this Period

125.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Ivan Schmidt

Mailing Address 5 Carlisle Lane

City State Zip Code  
 Niantic CT 06357

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
United Technologies

Occupation  
Engineer

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

575.00

Date of Receipt

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

Transaction ID: 60306.C35086

Amount of Each Receipt this Period

175.00

Receipt

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

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 85 / 184

(check only one)

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Dean Soliday Mailing Address 212 Laura Boulevard City State Zip Code Norwich CT 06360 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Plumber Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 650.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35284 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Stephanie Neale Mailing Address 20 Kidds Way City State Zip Code Stonington CT 06378 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Family Choice Mortgage Occupation Clerk Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35085 Amount of Each Receipt this Period 175.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Harold Pontez Mailing Address 5 Pine Forest Circle City State Zip Code Houston TX 77056 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Engineer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35682 Amount of Each Receipt this Period 900.00 Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>

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

275.00

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

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

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

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(check only one)

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☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Harold Pontez		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 5 Pine Forest Circle		<b>Transaction ID:</b> 60330.C35680
City Houston	State TX	Zip Code 77056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Self Employed	Occupation Engineer	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Harold Pontez		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 5 Pine Forest Circle		<b>Transaction ID:</b> 60330.C35681
City Houston	State TX	Zip Code 77056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -900.00
Name of Employer Self Employed	Occupation Engineer	Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Robert Meissner		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address 3420 Lakeside View Drive		<b>Transaction ID:</b> 60306.C35415
City Falls Church	State VA	Zip Code 22041
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Capitol Resources	Occupation Principal	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

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

2250.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Macon Toledano		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 123 Main Street		<b>Transaction ID:</b> 60306.C35229
City Chester	State CT	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Leyland Alliance	Occupation Project Manager	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Macon Toledano		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 123 Main Street		<b>Transaction ID:</b> 60306.C35231
City Chester	State CT	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C		Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Name of Employer Leyland Alliance	Occupation Project Manager	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Macon Toledano		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address 123 Main Street		<b>Transaction ID:</b> 60306.C35230
City Chester	State CT	Amount of Each Receipt this Period -200.00
FEC ID number of contributing federal political committee. C		Redesignation FROM Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Name of Employer Leyland Alliance	Occupation Project Manager	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

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

300.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Jeffrey Brown Mailing Address 120 High Meadow Lane City State Zip Code Mystic CT 06355 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35292 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Rick Murphy Mailing Address 10 Media Center Drive City State Zip Code Lake Havasu City AZ 86403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Murphy Broadcasting, Inc. Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 2100.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35688 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Rick Murphy Mailing Address 10 Media Center Drive City State Zip Code Lake Havasu City AZ 86403 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Murphy Broadcasting, Inc. Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4200.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35687 Amount of Each Receipt this Period 2100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

4300.00

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



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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mario Gioco Mailing Address 11 Highfield Lane City State Zip Code Chester CT 06412 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation CPA Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35119 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mario Gioco Mailing Address 11 Highfield Lane City State Zip Code Chester CT 06412 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation CPA Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 325.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35158 Amount of Each Receipt this Period 100.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) David Wilcox Mailing Address 57 High Wood Drive City State Zip Code South Glastonbury CT 06073-2907 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Middlesex Hospital Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35294 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Robin Resnick Mailing Address 3349 Oak Hill Street City Fort Lauderdale State FL Zip Code 33312 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C34894 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Tian-Tzy Li Mailing Address 80 Winding Lane City Greenwich State CT Zip Code 06831 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C34996 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Malcolm McGuire Mailing Address 80 Canterbury Lane City East Greenwich State RI Zip Code 02818 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Financial Consultant Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60118.C35005 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>SUBTOTAL</b> of Receipts This Page (optional) .....		1500.00
<b>TOTAL</b> This Period (last page this line number only) .....		

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Jim Matalone Mailing Address 2627 Pleasant Place City State Zip Code Sarasota FL 34239 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer NextMedia Outdoor Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60131.C35031 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Kenneth Klein Mailing Address 10315 Folk Street City State Zip Code Silver Spring MD 20902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Outdoor Advertising Occupation Executive Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 01 / 18 / 2006 <b>Transaction ID:</b> 60131.C35032 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Lee Sprague Mailing Address 89 Mount Vernon Street City State Zip Code Boston MA 02108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Real Estate Manager Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 200.00		Date of Receipt MM / DD / YYYY 02 / 06 / 2006 <b>Transaction ID:</b> 60306.C35079 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1200.00

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Ingrao Mailing Address 9610 Whitecedar Court City Vienna State VA Zip Code 22181 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Transportation Trades Dep- t. Occupation Treasurer Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35219 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) John Ianniello Mailing Address 510 Noank Road City Mystic State CT Zip Code 06355-2321 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer SAIC Occupation Executive Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35233 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Maria Powell Mailing Address 221 Case Street City Norwich State CT Zip Code 06360 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 200.00		Date of Receipt MM / DD / YYYY 02 / 15 / 2006 <b>Transaction ID:</b> 60306.C35307 Amount of Each Receipt this Period 200.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

700.00

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
 Sherri-Lynn Milkie  
 Mailing Address 31 Atlantic Avenue

City State Zip Code  
 Groton CT 06340-8802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Switz Real Estate

Occupation  
 Realtor

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

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

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

Transaction ID: 60306.C35327

Amount of Each Receipt this Period

500.00

Receipt

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

**B.** Full Name (Last, First, Middle Initial)  
 Sherri-Lynn Milkie  
 Mailing Address 31 Atlantic Avenue

City State Zip Code  
 Groton CT 06340-8802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Switz Real Estate

Occupation  
 Realtor

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

Election Cycle-to-Date ▼  
 600.00

Date of Receipt

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

Transaction ID: 60306.C35326

Amount of Each Receipt this Period

100.00

Receipt

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

**C.** Full Name (Last, First, Middle Initial)  
 William Geary  
 Mailing Address 2 Chesebro Lane

City State Zip Code  
 Stonington CT 06378

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 Self Employed

Occupation  
 Commercial Real Estate

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

Election Cycle-to-Date ▼  
 300.00

Date of Receipt

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

Transaction ID: 60306.C35360

Amount of Each Receipt this Period

300.00

Receipt

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

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

900.00

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Amory Houghton

Mailing Address 33 East Third Street

City State Zip Code  
 Corning NY 14830

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60306.C35408

Amount of Each Receipt this Period

500.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** William Stephens

Mailing Address 6724 Princess Anne Lane

City State Zip Code  
 Falls Church VA 22042

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Preston, Gates & Ellis

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60308.C35436

Amount of Each Receipt this Period

200.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Nancy Marenakos

Mailing Address 111 Wilderness Drive Apt. 119

City State Zip Code  
 Naples FL 34105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

200.00

Date of Receipt

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

Transaction ID: 60323.C35477

Amount of Each Receipt this Period

200.00

Receipt

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

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

900.00

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

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

Use separate schedule(s)  
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(check only one)

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David OConnor		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 855 Enfield Road P.O. Box 1279		<b>Transaction ID:</b> 60323.C35500
City Enfield	State CT	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Enfield Federal Savings	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) William Bouton		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 18 Rivercove Drive		<b>Transaction ID:</b> 60323.C35501
City Cromwell	State CT	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Tyler Cooper	Occupation Attorney	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Amarante		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 1409 South Street		<b>Transaction ID:</b> 60323.C35502
City Middlebury	State CT	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Infinex Financial Group	Occupation President	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

750.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Louis Dunlap Mailing Address 58 James Road East City State Zip Code Durham CT 06422 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Wells Fargo Bank Occupation Vice President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35503 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Leone Mailing Address 12 Wyndham Lane City State Zip Code Farmington CT 06032 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CT Online Computers Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35504 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Stephen Kayser Mailing Address 7 Livingston Road City State Zip Code Bloomfield CT 06002 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer CT Online Computers Occupation VP of Marketing Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35505 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

**750.00**

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



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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Gerald Coia Mailing Address 55 Homestead Drive City State Zip Code Storrs Mansfield CT 06268 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Eastern Federal Bank Occupation President Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35506 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Harlan Crow Mailing Address 2100 McKinney Avenue Suite 700 City State Zip Code Dallas TX 75201 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Crow Holdings Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60323.C35541 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Dominic Fulco Mailing Address 35 Bancroft Road City State Zip Code East Hartford CT 06118 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Health Insurance Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35549 Amount of Each Receipt this Period 250.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1500.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Jose Suarez

Mailing Address P.O. Box 270235

City State Zip Code  
W Hartford CT 06127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Walker Digital

Occupation  
CEO

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60330.C35559

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**B.** Charles Stofko

Mailing Address 18 Chimney Swift Road

City State Zip Code  
Sandy Hook CT 06482

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Consultant

Occupation  
Business Development

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60330.C35561

Amount of Each Receipt this Period

250.00

Receipt

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

Full Name (Last, First, Middle Initial)

**C.** Robert Needham

Mailing Address 1845 Les Chateaux Boulevard  
Apt. 302

City State Zip Code  
Naples FL 34109-1318

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Keefe, Bruyette & Woods

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: 60330.C35571

Amount of Each Receipt this Period

300.00

Receipt

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

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

800.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Mary Dangremond

Mailing Address P.O. Box 910

City State Zip Code  
 Old Lyme CT 06371-0910

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: 60330.C35577

Amount of Each Receipt this Period

500.00

Receipt

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

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

Astrid Horan

Mailing Address 107 Joshuatown Road  
 P.O. Box 72

City State Zip Code  
 Lyme CT 06371

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60330.C35587

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Charlie Howell

Mailing Address 13 Delno Drive

City State Zip Code  
 Danbury CT 06811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Patriot National Bank

Occupation  
President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: 60331.C35588

Amount of Each Receipt this Period

250.00

Receipt

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

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

1750.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Leyland Alliance LLC

Mailing Address 16 Sterling Lake Road

City State Zip Code

Tuxedo Park NY 10987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leyland Alliance

Occupation  
LLC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60331.C35599

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Steve Maun

Mailing Address 16 Sterling Lake Road

City State Zip Code

Tuxedo Park NY 10987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leyland Alliance

Occupation  
Partner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

333.34

Date of Receipt

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

Transaction ID: 60331.C35600

Amount of Each Receipt this Period

333.34

Memo

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

[MEMO ITEM]

Partnership->Leyland Alli-  
ance LLC

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

Howard Kaufman

Mailing Address 16 Sterling Lake Road

City State Zip Code

Tuxedo Park NY 10987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leyland Alliance

Occupation  
Partner

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

333.33

Date of Receipt

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

Transaction ID: 60331.C35601

Amount of Each Receipt this Period

333.33

Memo

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

[MEMO ITEM]

Partnership->Leyland Alli-  
ance LLC

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Louis Marquet		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 16 Sterling Lake Road		<b>Transaction ID:</b> 60331.C35602
City State Zip Code Tuxedo Park NY 10987	Amount of Each Receipt this Period 333.33	
FEC ID number of contributing federal political committee. C	Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b> Partnership->Leyland Alliance LLC	
Name of Employer Leyland Alliance	Occupation Partner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 333.33	

<b>B.</b> Full Name (Last, First, Middle Initial) Lisa Winkler		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 22 Avalon Drive		<b>Transaction ID:</b> 60330.C35609
City State Zip Code Avon CT 06001	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Innovate & Organize	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Patricia Priebe		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address 60 Kings Highway		<b>Transaction ID:</b> 60330.C35610
City State Zip Code North Haven CT 06473	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Innovate & Organize	Occupation Owner	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

1000.00

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

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Charles OMalley Mailing Address 28 Loyal Ledge Lane City Guilford State CT Zip Code 06437 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Guilford Savings Bank Occupation CEO Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35618 Amount of Each Receipt this Period 250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Richard Hazard Mailing Address 4710 NW Second Avenue Suite 400 City Boca Raton State FL Zip Code 33431 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Jamestown Metal Occupation Owner Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 500.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35632 Amount of Each Receipt this Period 500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Maurice Kent Mailing Address 4160 Cutlass Lane City Naples State FL Zip Code 34102 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Investor Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt MM / DD / YYYY 03 / 30 / 2006 <b>Transaction ID:</b> 60330.C35634 Amount of Each Receipt this Period 1000.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

1750.00

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

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NAME OF COMMITTEE (In Full)

Simmons For Congress

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

Peter Smith

Mailing Address 394 Gulf Street

City State Zip Code  
 Milford CT 06460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60330.C35645

Amount of Each Receipt this Period

1000.00

Receipt

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

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

William Velardo

Mailing Address 34 Mallard Point Road

City State Zip Code  
 Essex CT 06426

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mohegan Sun

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60330.C35648

Amount of Each Receipt this Period

1000.00

Receipt

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

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

Mitchell Etes

Mailing Address 9 Joshua Valley Road

City State Zip Code  
 East Lyme CT 06333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mohegan Sun

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: 60330.C35650

Amount of Each Receipt this Period

1000.00

Receipt

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

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

3000.00

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
J.A. Esquivel  
Mailing Address 9955 SW 87th CT

City State Zip Code  
Miami FL 33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
Phoenix WorldwideOccupation  
President

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

Election Cycle-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 60330.C35668

Amount of Each Receipt this Period

400.00

Redesignation TO Memo

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

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
J.A. Esquivel  
Mailing Address 9955 SW 87th CT

City State Zip Code  
Miami FL 33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
Phoenix WorldwideOccupation  
President

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

Election Cycle-to-Date ▼

0.00

Date of Receipt

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

Transaction ID: 60330.C35667

Amount of Each Receipt this Period

-400.00

Redesignation FROM Memo

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

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
J.A. Esquivel  
Mailing Address 9955 SW 87th CT

City State Zip Code  
Miami FL 33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
Phoenix WorldwideOccupation  
President

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

Election Cycle-to-Date ▼

2500.00

Date of Receipt

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

Transaction ID: 60330.C35666

Amount of Each Receipt this Period

2500.00

Receipt

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

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

2500.00

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



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
James Murphy  
Mailing Address 1150 Central Avenue

City State Zip Code  
Naples FL 34102

FEC ID number of contributing federal political committee.

C

Name of Employer  
Continental ConstructionOccupation  
Contractor

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35671

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Michael Patten  
Mailing Address 431 2nd Avenue S

City State Zip Code  
Naples FL 34102

FEC ID number of contributing federal political committee.

C

Name of Employer  
Redstone PropertiesOccupation  
Real Estate

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35672

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Donna Murphy  
Mailing Address 11780 SW 90th Avenue

City State Zip Code  
Miami FL 33176

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Homemaker

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35676

Amount of Each Receipt this Period

-400.00

Redesignation FROM Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Donna Murphy Mailing Address 11780 SW 90th Avenue City State Zip Code Miami FL 33176 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Homemaker Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35675 Amount of Each Receipt this Period 2500.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Donna Murphy Mailing Address 11780 SW 90th Avenue City State Zip Code Miami FL 33176 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Homemaker Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35677 Amount of Each Receipt this Period 400.00 Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Enrique Enriquez Mailing Address 8312 NW 74th Avenue City State Zip Code Miami FL 33166 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Locust U.S.A. Occupation President Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1250.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35678 Amount of Each Receipt this Period 1250.00 Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**3750.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

A. Full Name (Last, First, Middle Initial)

Maria Enriquez

Mailing Address 8312 NW 74th Avenue

City State Zip Code  
 Miami FL 33166

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mark Two Engineering, Inc.

Occupation  
Executive

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35679

Amount of Each Receipt this Period

1250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)

Fred Elser

Mailing Address 16 Winding Lane

City State Zip Code  
 Greenwich CT 06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35690

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)

Christopher Bowlin

Mailing Address 5115 N 15th Street

City State Zip Code  
 Arlington VA 22205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MWW Group

Occupation  
Senior Vice President

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 0 / 2 0 0 6

Transaction ID: 60331.C35715

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

Nancy Macklin

Mailing Address 24 Mustard Seed Lane

City

Milford

State

CT

Zip Code

06460

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Homemaker

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35735

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

107892.00

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 184

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)

Hampton Republican Town Committee

Mailing Address C/O Philip Russell  
P.O. Box 143City State Zip Code  
Hampton CT 06247FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Town of HamptonOccupation  
Town CommitteeReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60118.C35014

Amount of Each Receipt this Period

100.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.** Full Name (Last, First, Middle Initial)

Old Lyme Republican Town Committee

Mailing Address C/O Judy McQuade  
P.O. Box 52City State Zip Code  
Old Lyme CT 06371FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Town of Old LymeOccupation  
Town CommitteeReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35159

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.** Full Name (Last, First, Middle Initial)

Mohegan Tribe

Mailing Address C/O Charles Brunnell  
P.O. Box 488City State Zip Code  
Uncasville CT 06382FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mohegan Indian TribeOccupation  
Indian TribeReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35643

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2350.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☒ 11b ☐ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)

Mario Diaz-Balart for Congress

Mailing Address C/O Mario Diaz-Balart  
8770 Sunset Drive #422

City State Zip Code  
Miami FL 33173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mario Diaz-Balart

Occupation  
Political Committee

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35662

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

3350.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

NRA Political Victory Fund PAC

Mailing Address C/O Jason Ouimet  
11250 Waples Mill Road

City State Zip Code  
Fairfax VA 22030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NRA

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
4950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35368

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Wholesaler Dist PAC

Mailing Address C/O James Anderson  
1725 K Street NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wholesaler Distributor

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35723

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

Republican Majority for Choice PAC

Mailing Address C/O Jennifer Stockman  
57 West 57th Street Suite 1101

City State Zip Code  
New York City NY 10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Republicans For Choice

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35725

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Bayer PAC Mailing Address C/O Thomas Lilburn 100 Bayer Road City State Zip Code Pittsburgh PA 15205-9741 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Bayer Corporation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35674 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Truck PAC Mailing Address C/O Gray Mitchell 430 First Street SE City State Zip Code Washington DC 20003 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Trucking Association PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35726 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Northeast Utilities PAC Mailing Address C/O Judy Ostronic 601 Pennsylvania Ave. NW Ste. 620 City State Zip Code Washington DC 20004 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Northeast Utilities PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> 60330.C35698 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**3000.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Webster Bank PAC

Mailing Address C/O Arthur House  
145 Bank Street

City State Zip Code  
Waterbury CT 06702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Webster Bank

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60331.C35741

Amount of Each Receipt this Period

250.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** CBA FED PAC

Mailing Address C/O Gerald Noonan  
10 Waterside Drive

City State Zip Code  
Farmington CT 06032

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CT Bankers Association

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: 60323.C35507

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Build PAC

Mailing Address C/O Larry Fiano  
1201 15th St. NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Homebuilders

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60308.C35438

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

7250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Republican National Committee

Mailing Address C/O Ed Gillespie  
310 First Street SE

City State Zip Code  
Washington DC 20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Republican National Commi-  
tee

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35734

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
NFIB PAC

Mailing Address C/O Dan Danner  
1201 F St. NW, Suite 200

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Independent Businesses

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: 60330.C35552

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
NFIB PAC

Mailing Address C/O Dan Danner  
1201 F St. NW, Suite 200

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Independent Businesses

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35631

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** American Podiatric Medical PACMailing Address C/O Faye Frankfort  
9312 Old Georgetown RoadCity State Zip Code  
Bethesda MD 20814FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Podiatric Assoc.Occupation  
PACReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35419

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** United Technologies PACMailing Address C/O John Humphries  
1401 Eye St. NW Suite 600City State Zip Code  
Washington DC 20005FEC ID number of contributing  
federal political committee.

C

Name of Employer  
United TechnologiesOccupation  
PACReceipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35426

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Brown and Company PACMailing Address C/O Cynthia Brown  
600 Pennsylvania Ave. SE Ste 304City State Zip Code  
Washington DC 20003FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Brown & CompanyOccupation  
PACReceipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35417

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

6500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 116 / 184

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) PHCC PAC Mailing Address C/O Dwight Casey 180 S Washington Street City Falls Church State VA Zip Code 22046 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Plumbing, Heating, & Cooling Occupation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35414 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Food Marketing Institute PAC Mailing Address C/O Laura Bourne 655 15th St. NW Suite 700 City Washington State DC Zip Code 20005-5701 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Food Marketing Institute Occupation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35427 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) American Shipping PAC Mailing Address C/O Stanley Sher P.O. Box 34565 City Washington State DC Zip Code 20043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer American Shipping Occupation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35418 Amount of Each Receipt this Period 500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

**2500.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 117 / 184

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Republican Main Street PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address C/O Sarah Chamberlain Resnick 1220 L Street NW Ste. 100-263		<b>Transaction ID:</b> 60330.C35724
City Washington State DC Zip Code 20005	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Republican Main Street	Occupation PAC	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3125.51	

<b>B.</b> Full Name (Last, First, Middle Initial) Anteon PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address C/O Curtis Schehr 3211 Jermantown Rd. Ste. 700		<b>Transaction ID:</b> 60330.C35731
City Fairfax State VA Zip Code 22030-2844	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>		Redesignation TO Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Name of Employer Anteon	Occupation PAC	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Anteon PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address C/O Curtis Schehr 3211 Jermantown Rd. Ste. 700		<b>Transaction ID:</b> 60306.C35228
City Fairfax State VA Zip Code 22030-2844	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Anteon	Occupation PAC	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 184

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Anteon PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address C/O Curtis Schehr 3211 Jermantown Rd. Ste. 700		Transaction ID: 60330.C35730
City Fairfax	State VA	Amount of Each Receipt this Period -400.00
FEC ID number of contributing federal political committee. C		Redesignation FROM Memo
Name of Employer Anteon	Occupation PAC	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	<b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) Anteon PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address C/O Curtis Schehr 3211 Jermantown Rd. Ste. 700		Transaction ID: 60330.C35732
City Fairfax	State VA	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Anteon	Occupation PAC	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2600.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Anteon PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address C/O Curtis Schehr 3211 Jermantown Rd. Ste. 700		Transaction ID: 60330.C35733
City Fairfax	State VA	Amount of Each Receipt this Period 1600.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Anteon	Occupation PAC	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

SUBTOTAL of Receipts This Page (optional) .....

1700.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** American Hospital Association PAC

Mailing Address C/O Patti Roberts Goldman  
325 Seventh Street NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Hospital Assoc.

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35664

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** NMMA PAC

Mailing Address C/O Nick Tindall  
444 N Capital Street NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Marine Manufactu-  
ring

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35421

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Engineers Political Education PAC

Mailing Address C/O Ben Cozzi  
1125 Seventeenth St. NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Engineers Education Commi-  
tee

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 60306.C35211

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Democracy Believers PAC

Mailing Address C/O Lincoln Diaz-Balart

1155 21st Street NW Suite 300

City

State

Zip Code

Washington

DC

20036

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Democracy Believers

Occupation  
PAC

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35670

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** National Emergency Medicine PAC

Mailing Address C/O Dean Wilkerson

P.O. Box 619911

City

State

Zip Code

Dallas

TX

75261-9911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Emergency Medici-  
ne

Occupation  
PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: 60323.C35543

Amount of Each Receipt this Period

2000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Physical Therapy PAC

Mailing Address C/O Dave Mason

1111 N Fairfax Street

City

State

Zip Code

Alexandria

VA

22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Physical Therapy Associat-  
ion

Occupation  
PAC

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35422

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

9500.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 184

(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)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Phil PAC Mailing Address C/O Phil English P.O. Box 26366 City State Zip Code Alexandria VA 22313 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phil English Occupation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4485.58</div>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60330.C35661 Amount of Each Receipt this Period <div style="text-align: right;">3485.58</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	6												
<b>B.</b> Full Name (Last, First, Middle Initial) Phil PAC Mailing Address C/O Phil English P.O. Box 26366 City State Zip Code Alexandria VA 22313 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Phil English Occupation PAC Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">4985.58</div>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60401.C35790 Amount of Each Receipt this Period <div style="text-align: right;">500.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		3	0		2	0	0	6												
<b>C.</b> Full Name (Last, First, Middle Initial) Duke Energy PAC Mailing Address C/O Lawrence Valenti 422 South Church St. PBO5D City State Zip Code Charlotte NC 28202 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Duke Energy Occupation PAC Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">1000.00</div>	Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> 60306.C35423 Amount of Each Receipt this Period <div style="text-align: right;">1000.00</div> Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	6		2	0	0	6												

**SUBTOTAL** of Receipts This Page (optional) .....**4985.58****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 122 / 184

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) International Firefighters PAC Mailing Address C/O Harold Schaitberger 1750 New York Avenue NW City Washington State DC Zip Code 20006 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Association of Firefighters Occupation PAC Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 5000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> 60306.C35234 Amount of Each Receipt this Period 2500.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Outdoor Advertising PAC Mailing Address C/O Catherine McDaniel 1850 M St. NW Ste. 1040 City Washington State DC Zip Code 20036 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Outdoor Advertising Occupation PAC Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6 <b>Transaction ID:</b> 60131.C35028 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) New York Life PAC Mailing Address C/O Jonathan Paone 51 Madison Avenue Room 1900 City New York State NY Zip Code 10010 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer New York Life Insurance Occupation PAC Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 4000.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 6 / 2 0 0 6 <b>Transaction ID:</b> 60308.C35437 Amount of Each Receipt this Period 1000.00 <b>Receipt</b> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Terex PAC			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 3 / 2 0 0 6	
Mailing Address C/O Eric Cohen 500 Post Road East Ste 320			<b>Transaction ID:</b> 60323.C35542	
City State Zip Code Westport CT 06880			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Terex Corporation		Occupation PAC		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Lee PAC			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6	
Mailing Address C/O Nancy Johnson 4451 Brookfield Corporate Drive			<b>Transaction ID:</b> 60330.C35663	
City State Zip Code Chantilly VA 20151			Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Lee		Occupation PAC		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 10000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) US Cuba Democracy PAC			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6	
Mailing Address C/O Mauricio Claver-Carone 1200 West 49th Street			<b>Transaction ID:</b> 60401.C35786	
City State Zip Code Hialeah FL 33012			Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer US Cuba Democracy		Occupation PAC		
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00		

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
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NAME OF COMMITTEE (In Full)

Simmons For Congress

## **A.**

Full Name (Last, First, Middle Initial)

US Oncology PAC

Mailing Address C/O Eric Berger  
16825 Northchase Drive Ste. 1300

City State Zip Code  
Houston TX 77060

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
US Oncology

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35665

Amount of Each Receipt this Period

2500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **B.**

Full Name (Last, First, Middle Initial)

Wine and Spirits PAC

Mailing Address C/O Nicole deSibour  
805 15th Street NW Suite 430

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Wine and Spirits

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35722

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **C.**

Full Name (Last, First, Middle Initial)

Parsons Brinckerhoff PAC

Mailing Address C/O Catherine Connor  
One Penn Plaza

City State Zip Code  
New York NY 10119

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Parsons Brinckerhoff

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35048

Amount of Each Receipt this Period

500.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

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(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) IRL PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address C/O Enrique Ros P.O. Box 10460		<b>Transaction ID:</b> 60330.C35659
City State Zip Code Burke VA 22009	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Intl Republican Leadership	Occupation PAC	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) IRL PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address C/O Enrique Ros P.O. Box 10460		<b>Transaction ID:</b> 60330.C35660
City State Zip Code Burke VA 22009	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Intl Republican Leadership	Occupation PAC	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Transportation Trades Dept. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6
Mailing Address C/O Michael Ingrao 888 16th Street NW Ste. 650		<b>Transaction ID:</b> 60306.C35220
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C	Receipt <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Transportation Trades Dept.	Occupation PAC	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Amalgamated Transit Committee PAC

Mailing Address C/O Oscar Owens

5025 Wisconsin Avenue NW

City

Washington

State

DC

Zip Code

20016-4139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Amalgamated Transit Union

Occupation

PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	6		2	0	0	6

Transaction ID: 60306.C35420

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Transport Workers Union PAC

Mailing Address C/O Mike OBrien

1700 Broadway 2nd Floor

City

New York

State

NY

Zip Code

10019-5905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transport Workers Union

Occupation

PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	0	6

Transaction ID: 60118.C34984

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Lamar PAC

Mailing Address C/O Keith Istre

P.O. Box 66338

City

Baton Rouge

State

LA

Zip Code

70896

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lamar

Occupation

PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	0	6

Transaction ID: 60131.C35029

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Simmons For Congress

## **A.**

Full Name (Last, First, Middle Initial)

AHCA PAC

Mailing Address C/O Robert Van-Dyk  
1201 L Street NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Health Care

Occupation  
PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 0 6

Transaction ID: 60131.C35036

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **B.**

Full Name (Last, First, Middle Initial)

OAQIA PAC

Mailing Address C/O Kristen Beaubien  
1090 Vermont Avenue NW Ste. 510

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Osteopathic Association

Occupation  
PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 6 / 2 0 0 6

Transaction ID: 60306.C35425

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

## **C.**

Full Name (Last, First, Middle Initial)

AT&T PAC

Mailing Address C/O Jonathan King  
175 E. Houston, Room 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AT&T

Occupation  
PAC

Receipt For: 2006

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 6

Transaction ID: 60323.C35495

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

SAIC PAC

Mailing Address C/O Jay Killeen  
10260 Campus Point Drive MS: F2

City State Zip Code  
San Diego CA 92121-1522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Scientific Applications  
Corp.

Occupation  
PAC

Receipt For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35586

Amount of Each Receipt this Period

1000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

Longhorn PAC

Mailing Address C/O Lamar Smith  
228 S. Washington Street Ste. B-20

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Longhorn

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 0 / 2 0 0 6

Transaction ID: 60330.C35669

Amount of Each Receipt this Period

5000.00

Receipt

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

89935.58



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Majority 2006 PAC Mailing Address C/O Chris Ward P.O. Box 40427 City Washington State DC Zip Code 20016- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Majority 2006 Occupation Authorized Committee Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 26820.74		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60331.C35757 Amount of Each Receipt this Period 13114.27 Transfers From Affil./Aut-h. <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Helen Spitzer Mailing Address 1446 59th Street City Brooklyn State NY Zip Code 11219- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1428.57		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60331.C35782 Amount of Each Receipt this Period 1428.57 Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Maxwell Solet Mailing Address 15 Berkeley Street City Cambridge State MA Zip Code 02138- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Mintz Levin Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 14.29		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6 <b>Transaction ID:</b> 60331.C35771 Amount of Each Receipt this Period 14.29 Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>

**SUBTOTAL** of Receipts This Page (optional) .....

13114.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

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☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

A. Full Name (Last, First, Middle Initial)

Solutions America PAC

Mailing Address 575 8th Avenue

City State Zip Code  
Milton MA 02186-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz Levin

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2006

Transaction ID: 60331.C35767

Amount of Each Receipt this Period

5000.00

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)

Richard Kelly

Mailing Address 666 Third Avenue

City State Zip Code  
New York NY 10017-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz Levin

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
35.71

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2006

Transaction ID: 60331.C35772

Amount of Each Receipt this Period

35.71

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)

Andrew Urban

Mailing Address One Financial Center

City State Zip Code  
Boston MA 02111-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz Levin

Occupation  
Attorney

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
71.43

Date of Receipt

M M / D D / Y Y Y Y Y  
03 31 2006

Transaction ID: 60331.C35763

Amount of Each Receipt this Period

71.43

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
Steven Rosenthal

Mailing Address 40 Bartlett Street

City State Zip Code  
Marblehead MA 01945-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz LevinOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

71.43

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35765

Amount of Each Receipt this Period

71.43

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Charles Carey

Mailing Address 185 Silver Hill Road

City State Zip Code  
Concord MA 01742-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz LevinOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

28.57

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35766

Amount of Each Receipt this Period

28.57

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Gregory Sandomirsky

Mailing Address 251 North Street

City State Zip Code  
Medfield MA 02052-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mintz LevinOccupation  
Attorney

Receipt For: 2006

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

35.73

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35774

Amount of Each Receipt this Period

35.73

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Miyoko Sato Mailing Address 24 Hinckley Road City State Zip Code Milton MA 02186- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Mintz Levin Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">28.57</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y  0 3 / 3 1 / 2 0 0 6 </div> <b>Transaction ID:</b> 60331.C35768 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">28.57</div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Popeo Mailing Address One Financial Center City State Zip Code Boston MA 02111- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Mintz Levin Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">71.43</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y  0 3 / 3 1 / 2 0 0 6 </div> <b>Transaction ID:</b> 60331.C35764 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">71.43</div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Peter Zlotnick Mailing Address 27 Louise Lane City State Zip Code Tenafly NJ 07670- FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Mintz Levin Attorney Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <div style="text-align: right;">7.14</div>	Date of Receipt <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y  0 3 / 3 1 / 2 0 0 6 </div> <b>Transaction ID:</b> 60331.C35776 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">7.14</div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 150px;">0.00</div>	
<b>TOTAL</b> This Period (last page this line number only) ..... ▶ <div style="border: 1px solid black; padding: 2px; text-align: right; width: 150px;"></div>	

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Regier Mailing Address 89 Farnham Street  <table style="width: 100%;"> <tr> <td style="width: 33%;">City Belmont</td> <td style="width: 33%;">State MA</td> <td style="width: 33%;">Zip Code 02478-</td> </tr> </table> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>  <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer Mintz Levin</td> <td style="width: 33%;">Occupation Attorney</td> <td style="width: 33%;"></td> </tr> </table> Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  Election Cycle-to-Date ▼ <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">35.71</span> </div>	City Belmont	State MA	Zip Code 02478-	Name of Employer Mintz Levin	Occupation Attorney		Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y</td> <td style="width: 33%;">0 3 / 3 1 / 2 0 0 6</td> <td style="width: 33%;"></td> </tr> </table> Transaction ID: 60331.C35775 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">35.71</span> </div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6	
City Belmont	State MA	Zip Code 02478-								
Name of Employer Mintz Levin	Occupation Attorney									
M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6									
<b>B.</b> Full Name (Last, First, Middle Initial) Robert Bodian Mailing Address 118 E 82nd Street  <table style="width: 100%;"> <tr> <td style="width: 33%;">City New York</td> <td style="width: 33%;">State NY</td> <td style="width: 33%;">Zip Code 10028-</td> </tr> </table> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>  <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer Mintz Levin</td> <td style="width: 33%;">Occupation Attorney</td> <td style="width: 33%;"></td> </tr> </table> Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  Election Cycle-to-Date ▼ <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">35.71</span> </div>	City New York	State NY	Zip Code 10028-	Name of Employer Mintz Levin	Occupation Attorney		Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y</td> <td style="width: 33%;">0 3 / 3 1 / 2 0 0 6</td> <td style="width: 33%;"></td> </tr> </table> Transaction ID: 60331.C35773 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">35.71</span> </div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6	
City New York	State NY	Zip Code 10028-								
Name of Employer Mintz Levin	Occupation Attorney									
M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6									
<b>C.</b> Full Name (Last, First, Middle Initial) Kenneth Raske Mailing Address 555 W 57th Street  <table style="width: 100%;"> <tr> <td style="width: 33%;">City New York City</td> <td style="width: 33%;">State NY</td> <td style="width: 33%;">Zip Code 10019-</td> </tr> </table> FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>  <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer Greater NY Hospital Assoc.</td> <td style="width: 33%;">Occupation President</td> <td style="width: 33%;"></td> </tr> </table> Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  Election Cycle-to-Date ▼ <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">142.84</span> </div>	City New York City	State NY	Zip Code 10019-	Name of Employer Greater NY Hospital Assoc.	Occupation President		Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%;">M M / D D / Y Y Y Y Y</td> <td style="width: 33%;">0 3 / 3 1 / 2 0 0 6</td> <td style="width: 33%;"></td> </tr> </table> Transaction ID: 60331.C35778 Amount of Each Receipt this Period <div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">142.84</span> </div> Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6	
City New York City	State NY	Zip Code 10019-								
Name of Employer Greater NY Hospital Assoc.	Occupation President									
M M / D D / Y Y Y Y Y	0 3 / 3 1 / 2 0 0 6									
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		<div style="border: 1px solid black; width: 100%; height: 20px; position: relative;"> <span style="position: absolute; right: 10px; bottom: 10px;">0.00</span> </div>								
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		<div style="border: 1px solid black; width: 100%; height: 20px;"></div>								

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 184

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input checked="" 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)

Simmons For Congress

**A.**

Full Name (Last, First, Middle Initial)

Jerry Speyer

Mailing Address 45 Rockefeller Plaza

City	State	Zip Code
New York	NY	10111-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tishman SpeyerOccupation  
President

Receipt For: 2006

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

714.29

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35785

Amount of Each Receipt this Period

714.29

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Patrick Ryan

Mailing Address 1001 Green Bay Road  
PMB 309

City	State	Zip Code
Winntka	IL	60093-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Aon CorporationOccupation  
President

Receipt For: 2006

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1428.57

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35781

Amount of Each Receipt this Period

1428.57

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

Peter Johnson

Mailing Address 120 Wall Street

City	State	Zip Code
New York	NY	10005-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Leahey & Johnson PCOccupation  
Partner

Receipt For: 2006

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

285.72

Date of Receipt

M M	/	D D	/	Y Y Y Y
0 3	/	3 1	/	2 0 0 6

Transaction ID: 60331.C35783

Amount of Each Receipt this Period

285.72

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**[MEMO ITEM]**

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 184

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

**A.** Full Name (Last, First, Middle Initial)  
John Damato  
Mailing Address 1010 Forest Avenue

City State Zip Code  
Staten Island NY 10310-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Molinari Group

Occupation  
Partner

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
142.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60331.C35777

Amount of Each Receipt this Period

142.86

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Thomas DAuria  
Mailing Address 174 Rutledge Avenue

City State Zip Code  
Hawthorne NY 10532-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
IMI Group

Occupation  
Chairman

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
714.28

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60331.C35759

Amount of Each Receipt this Period

714.28

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
Robert Johnson  
Mailing Address 630 Fifth Avenue  
Suite 1510

City State Zip Code  
New York NY 10111-

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Johnson Company

Occupation  
Chairman

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
142.86

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 6

Transaction ID: 60331.C35762

Amount of Each Receipt this Period

142.86

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 / 184

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Mimi Fischbein		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 909 Third Avenue 17th Floor		<b>Transaction ID:</b> 60331.C35761
City State Zip Code New York NY 10022-	Amount of Each Receipt this Period 142.86	
FEC ID number of contributing federal political committee. C	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	
Name of Employer Self Employed	Occupation Homemaker	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 142.86	

<b>B.</b> Full Name (Last, First, Middle Initial) Lee Perlman		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 10 Orsini Drive		<b>Transaction ID:</b> 60331.C35779
City State Zip Code Larchmont NY 10538-	Amount of Each Receipt this Period 142.86	
FEC ID number of contributing federal political committee. C	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	
Name of Employer Greater NY Hospital Assoc.	Occupation CEO	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 142.86	

<b>C.</b> Full Name (Last, First, Middle Initial) George Klein		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 499 Park Avenue		<b>Transaction ID:</b> 60331.C35784
City State Zip Code New York NY 10022-	Amount of Each Receipt this Period 714.27	
FEC ID number of contributing federal political committee. C	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>	
Name of Employer Park Tower Group	Occupation Executive	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 714.27	

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 / 184

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) David Rich		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 519 Prospect Street		<b>Transaction ID:</b> 60331.C35760
City Maplewood	State NJ	Zip Code 07040-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 428.57
Name of Employer Greater NY Hospital Assoc.	Occupation Senior VP	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1142.86	

<b>B.</b> Full Name (Last, First, Middle Initial) David Rich		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address 519 Prospect Street		<b>Transaction ID:</b> 60331.C35780
City Maplewood	State NJ	Zip Code 07040-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 714.29
Name of Employer Greater NY Hospital Assoc.	Occupation Senior VP	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1142.86	

<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Communications PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address C/O Dennis Glaves 1717 Arch Street 47-S		<b>Transaction ID:</b> 60331.C35769
City Philadelphia	State PA	Zip Code 19103-
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 714.28
Name of Employer Verizon	Occupation PAC	Transfer Memo <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <b>[MEMO ITEM]</b>
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 714.28	

**SUBTOTAL** of Receipts This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 184

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☒ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Simmons For Congress

Full Name (Last, First, Middle Initial)

A. Anheuser Busch PAC

Mailing Address C/O Michael Roche  
1401 I Street NW Ste. 200

City State Zip Code  
Washington DC 20003-

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anheuser Busch

Occupation  
PAC

Receipt For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

714.28

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2006

Transaction ID: 60331.C35770

Amount of Each Receipt this Period

714.28

Transfer Memo

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

13114.27

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A. TVCAA Fuel Assistance Fund**Mailing Address 401 West Thames Street  
Unit 201

City Norwich State CT Zip Code 06360-

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3131

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	0	6

Amount of Each Disbursement this Period

7900.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONTRIBUTION

**B. AT&T**

Mailing Address P.O. Box 2971

City Omaha State NE Zip Code 68103-

Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3126

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	0	6

Amount of Each Disbursement this Period

74.77

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TELEPHONE

**C. SBC**

Mailing Address P.O.Box 8387

City New Haven State CT Zip Code 06530-

Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3191

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	6

Amount of Each Disbursement this Period

231.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TELEPHONE

SUBTOTAL of Disbursements This Page (optional) .....

8206.01

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. CL&amp;P</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2960 City Hartford State CT Zip Code 06104- Purpose of Disbursement ELECTRICITY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<b>Transaction ID: 60306.E3224</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 144.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>ELECTRICITY</b>
<b>B. Norwich Police</b> Full Name (Last, First, Middle Initial) Mailing Address 70 Thames Street City Norwich State CT Zip Code 06360- Purpose of Disbursement ADVERTISEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<b>Transaction ID: 51224.E3106</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 495.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>ADVERTISEMENT</b>
<b>C. CL&amp;P</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2960 City Hartford State CT Zip Code 06104- Purpose of Disbursement ELECTRICITY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			<b>Transaction ID: 51227.E3121</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 116.20 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>ELECTRICITY</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**755.29**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Diane Generous

Mailing Address 172 Pautipaug Hill Road

City State Zip Code  
Baltic CT 06330-Purpose of Disbursement  
SALARY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3205

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	6

Amount of Each Disbursement this Period

1636.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

**B.** Mystic Marriott

Mailing Address 625 North Rd. Rt 117

City State Zip Code  
Groton CT 06340-Purpose of Disbursement  
FUNDRAISING EXPENSE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3220

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	6

Amount of Each Disbursement this Period

212.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial)

**C.** Citizens Bank

Mailing Address West Broad Street

City State Zip Code  
Pawcatuck CT 06379-Purpose of Disbursement  
SERVICE CHARGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3282

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	6

Amount of Each Disbursement this Period

219.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional) .....

2067.46

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Precinct 13 LLC**

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement  
CONSULTING FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3228

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

## **B. Liberty Day**

Mailing Address 2275 East Arapahoe Road  
Suite #218

City Centennial State CO Zip Code 80122-

Purpose of Disbursement  
CAMPAIGN LITERATURE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3232

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

785.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAMPAIGN LITERATURE

Full Name (Last, First, Middle Initial)

## **C. Visa**

Mailing Address P.O. Box 151

City Norwich State CT Zip Code 06360-0151

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3198

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

689.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional) .....

4474.15

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A. NTT/Verio</b> Full Name (Last, First, Middle Initial) Mailing Address 5050 Conference Way N City Boca Raton State FL Zip Code 33431- Purpose of Disbursement WEBSITE FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60306.E3199 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 251.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: WEBSITE FEE
<b>B. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address Main Street City Mystic State CT Zip Code 06355- Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60306.E3200 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 390.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b> MEMO: POSTAGE
<b>C. Direct Mail Systems</b> Full Name (Last, First, Middle Initial) Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement DIRECT MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60306.E3217 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 2300.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 DIRECT MAIL

**SUBTOTAL** of Disbursements This Page (optional) .....

**2300.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. Visa</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 151 City Norwich State CT Zip Code 06360-0151 Purpose of Disbursement CREDIT CARD PAYMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60306.E3242 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 109.60 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CREDIT CARD PAYMENT</b>
<b>B. Admin Unemploy Comp</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2940 City Hartford State CT Zip Code 06104-2940 Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60118.E3160 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period 67.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>C. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address Main Street City Mystic State CT Zip Code 06355- Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 51227.E3140 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 0 6 Amount of Each Disbursement this Period 390.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>POSTAGE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**567.10**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Comm. Of Revenue Services**

Mailing Address 451 High Street

City Hartford State CT Zip Code 06103-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60131.E3165

Date of Disbursement

/   /

Amount of Each Disbursement this Period

159.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

## **B. Federal Express**

Mailing Address P.O. Box 1140

City Memphis State TN Zip Code 38101-

Purpose of Disbursement  
SHIPPING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 51227.E3123

Date of Disbursement

/   /

Amount of Each Disbursement this Period

36.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SHIPPING

Full Name (Last, First, Middle Initial)

## **C. DFS Acceptance**

Mailing Address P.O. Box 5292

City Carol Stream State IL Zip Code 60197-5292

Purpose of Disbursement  
COMPUTER LEASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60306.E3194

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER LEASE

**SUBTOTAL** of Disbursements This Page (optional) .....

329.12

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Bessette		<b>Transaction ID:</b> 60306.E3229 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 33 Mayflower Avenue		<b>Amount of Each Disbursement this Period</b> <div>870.37</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>
City Pawcatuck State CT Zip Code 06379-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div>	
Purpose of Disbursement SALARY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Citizens Bank		<b>Transaction ID:</b> 60330.E3278 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 6</div> </div>
Mailing Address West Broad Street		<b>Amount of Each Disbursement this Period</b> <div>118.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SERVICE CHARGE</b>
City Pawcatuck State CT Zip Code 06379-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div>	
Purpose of Disbursement SERVICE CHARGE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jason Stark		<b>Transaction ID:</b> 60119.E3163 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 7 / 2 0 0 6</div> </div>
Mailing Address 3699 Broadbridge Avenue Unit #310		<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>RESEARCH CONSULTANT</b>
City Stratford State CT Zip Code 06614-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President </div> </div>	
Purpose of Disbursement RESEARCH CONSULTANT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1488.37

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<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)  
Simmons For Congress

<b>A. SBC</b> Full Name (Last, First, Middle Initial) Mailing Address P.O.Box 8387 City New Haven State CT Zip Code 06530- Purpose of Disbursement TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60119.E3154</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 230.35 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE
<b>B. Mystic Packer Associates</b> Full Name (Last, First, Middle Initial) Mailing Address 12 Roosevelt Avenue City Mystic State CT Zip Code 06355- Purpose of Disbursement RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3166</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1539.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
<b>C. Federal Express</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101- Purpose of Disbursement SHIPPING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3221</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 36.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SHIPPING

SUBTOTAL of Disbursements This Page (optional) .....

1805.72

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement  
TELEPHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E3169

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

325.31

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TELEPHONE

Full Name (Last, First, Middle Initial)

## **B. Comcast Cable**

Mailing Address 401 Gold Star Highway

City Groton State CT Zip Code 06340-

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3201

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

121.26

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE EXPENSE

Full Name (Last, First, Middle Initial)

## **C. RBS Systems**

Mailing Address 600 Morgan Falls Road

City Atlanta State GA Zip Code 30350-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3280

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

113.12

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

559.69

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Jason Stark		<b>Transaction ID:</b> 60306.E3233 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 3699 Broadbridge Avenue Unit #310		<b>Amount of Each Disbursement this Period</b> <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>RESEARCH CONSULTANT</b>
City Stratford State CT Zip Code 06614-		
Purpose of Disbursement RESEARCH CONSULTANT	<div>Category/ Type</div>	
Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Poland Spring		<b>Transaction ID:</b> 51227.E3120 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 2767 E. Imperial Highway		<b>Amount of Each Disbursement this Period</b> <div>36.69</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>WATER</b>
City Brea State CA Zip Code 92821-		
Purpose of Disbursement WATER	<div>Category/ Type</div>	
Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Kate Mercer		<b>Transaction ID:</b> 51227.E3122 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 1225 Pequot Trail		<b>Amount of Each Disbursement this Period</b> <div>715.50</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>PHOTOGRAPHY</b>
City Stonington State CT Zip Code 06378-		
Purpose of Disbursement PHOTOGRAPHY	<div>Category/ Type</div>	
Candidate Name	<div>Category/ Type</div>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

1252.19

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. Postmaster</b> Full Name (Last, First, Middle Initial) Mailing Address Main Street City Mystic State CT Zip Code 06355- Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60131.E3167 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>390.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>POSTAGE</b>
<b>B. Verizon Wireless</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 489 City Newark State NJ Zip Code 07101-0489 Purpose of Disbursement TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 51227.E3137 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>326.31</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TELEPHONE</b>
<b>C. Susan Bessette</b> Full Name (Last, First, Middle Initial) Mailing Address 33 Mayflower Avenue City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID:</b> 60306.E3251 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 6</div> </div> Amount of Each Disbursement this Period <div>848.15</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1564.46**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<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)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Eric Janney		<b>Transaction ID:</b> 60306.E3225 <b>Date of Disbursement</b> <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>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	1		2	0	0	6														
Mailing Address 898 Ocean Avenue		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">1169.63</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		1169.63																			
1169.63																							
City New London State CT Zip Code 06320-	Purpose of Disbursement SALARY Candidate Name	<input type="checkbox"/> Category/ Type	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>SALARY</b>																						
<b>B.</b> Full Name (Last, First, Middle Initial) Visa		<b>Transaction ID:</b> 60306.E3195 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	0	6														
Mailing Address P.O. Box 151		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">411.21</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		411.21																			
411.21																							
City Norwich State CT Zip Code 06360-0151	Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name	<input type="checkbox"/> Category/ Type	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>CREDIT CARD: SEE BELOW</b>																						
<b>C.</b> Full Name (Last, First, Middle Initial) Capital Hill Suites		<b>Transaction ID:</b> 60306.E3197 <b>Date of Disbursement</b> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	5		2	0	0	6														
Mailing Address 200 C Street SE		<b>Amount of Each Disbursement this Period</b> <table border="1"> <tr> <td colspan="10">214.12</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53		214.12																			
214.12																							
City Washington State DC Zip Code 20003-	Purpose of Disbursement TRAVEL EXPENSE Candidate Name	<input type="checkbox"/> Category/ Type	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<b>[MEMO ITEM]</b> <b>MEMO: TRAVEL EXPENSE</b>																						

SUBTOTAL of Disbursements This Page (optional) .....

1580.84

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input 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)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A. Southwest Airline**

Mailing Address 2425 Wyman Street

City Dallas State TX Zip Code 75235-

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3196

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	6

Amount of Each Disbursement this Period

157.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**B. Diane Generous**

Mailing Address 172 Pautipaug Hill Road

City Baltic State CT Zip Code 06330-

Purpose of Disbursement  
SALARY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3250

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	6

Amount of Each Disbursement this Period

1636.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

**C. Citizens Bank**

Mailing Address West Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3283

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	0	6

Amount of Each Disbursement this Period

68.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional) .....

1704.34

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A. EDonation</b> Full Name (Last, First, Middle Initial) Mailing Address 228 S. Washington St. #240 City Alexandria State VA Zip Code 22314- Purpose of Disbursement SERVICE CHARGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3184</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 32.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SERVICE CHARGE</b>
<b>B. Comm. Of Revenue Services</b> Full Name (Last, First, Middle Initial) Mailing Address 451 High Street City Hartford State CT Zip Code 06103- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60119.E3146</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 99.34 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>C. Citizens Bank</b> Full Name (Last, First, Middle Initial) Mailing Address West Broad Street City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3164</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1052.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1184.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A. Citizens Bank</b> Full Name (Last, First, Middle Initial) Mailing Address West Broad Street City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3236</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 660.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>B. Direct Mail Systems</b> Full Name (Last, First, Middle Initial) Mailing Address 12450 Automobile Boulevard City Clearwater State FL Zip Code 33762- Purpose of Disbursement DIRECT MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3172</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 6826.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>DIRECT MAIL</b>
<b>C. Wilson Grand Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 429 N. Saint Asaph Street City Alexandria State VA Zip Code 22314- Purpose of Disbursement CONSULTING FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3212</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6 Amount of Each Disbursement this Period 3000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CONSULTING FEE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**10487.35**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. Citizens Bank</b> Full Name (Last, First, Middle Initial) Mailing Address West Broad Street City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3185</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 3001.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>B. Susan Bessette</b> Full Name (Last, First, Middle Initial) Mailing Address 33 Mayflower Avenue City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3209</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 837.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>
<b>C. Christopher Healy</b> Full Name (Last, First, Middle Initial) Mailing Address 27 Dorchester Road City Wethersfield State CT Zip Code 06109- Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3210</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 214.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL EXPENSE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4052.98**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A. Comm. Of Revenue Services**

Mailing Address 451 High Street

City Hartford State CT Zip Code 06103-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3186

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	6

Amount of Each Disbursement this Period

355.41

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

**B. Visa**

Mailing Address P.O. Box 151

City Norwich State CT Zip Code 06360-0151

Purpose of Disbursement  
CREDIT CARD: SEE BELOW

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3128

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	0	6

Amount of Each Disbursement this Period

409.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Postmaster**

Mailing Address Main Street

City Mystic State CT Zip Code 06355-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3129

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	0	6

Amount of Each Disbursement this Period

370.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]**

MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional) .....

764.42

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Direct Mail Systems**

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 33762-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60119.E3147

Date of Disbursement

/   /

Amount of Each Disbursement this Period

847.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. Jason Stark**

Mailing Address 3699 Broadbridge Avenue  
Unit #310

City Stratford State CT Zip Code 06614-

Purpose of Disbursement  
RESEARCH CONSULTANT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51130.E3076

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

RESEARCH CONSULTANT

Full Name (Last, First, Middle Initial)

## **C. RBS Systems**

Mailing Address 600 Morgan Falls Road

City Atlanta State GA Zip Code 30350-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3277

Date of Disbursement

/   /

Amount of Each Disbursement this Period

49.89

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD FEE

**SUBTOTAL** of Disbursements This Page (optional) .....

1397.64

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Bessette		<b>Transaction ID:</b> 51227.E3114 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 33 Mayflower Avenue		<b>Amount of Each Disbursement this Period</b> <div>782.02</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>
City Pawcatuck State CT Zip Code 06379-		
Purpose of Disbursement SALARY	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) Keelen Communications		<b>Transaction ID:</b> 60306.E3188 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>
Mailing Address P.O. Box 2776		<b>Amount of Each Disbursement this Period</b> <div>8066.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISING FEE</b>
City Arlington State VA Zip Code 22202-		
Purpose of Disbursement FUNDRAISING FEE	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) Seamens Inne		<b>Transaction ID:</b> 60131.E3174 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div>
Mailing Address Mystic Seaport		<b>Amount of Each Disbursement this Period</b> <div>1225.22</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISING EXPENSE</b>
City Mystic State CT Zip Code 06355-		
Purpose of Disbursement FUNDRAISING EXPENSE	<input type="checkbox"/> Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

**SUBTOTAL** of Disbursements This Page (optional) .....

**10073.24**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. RBS Systems**

Mailing Address 600 Morgan Falls Road

City Atlanta State GA Zip Code 30350-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3284

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

94.70

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

## **B. CL&P**

Mailing Address P.O. Box 2960

City Hartford State CT Zip Code 06104-

Purpose of Disbursement  
ELECTRICITY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E3171

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

126.62

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

ELECTRICITY

Full Name (Last, First, Middle Initial)

## **C. New Media Communications**

Mailing Address Summit of Richfield II  
 3046 Brecksville Road

City Richfield State OH Zip Code 44286-

Purpose of Disbursement  
WEBSITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3193

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

WEBSITE

**SUBTOTAL** of Disbursements This Page (optional) .....

346.32

**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 PageFOR 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)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A. Comm. Of Revenue Services**

Mailing Address 451 High Street

City Hartford State CT Zip Code 06103-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3112

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

150.54

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

**B. AGJO**

Mailing Address 173 South Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
CAMPAIGN LITERATURE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3215

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	1	/	2	0	0	6

Amount of Each Disbursement this Period

322.77

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAMPAIGN LITERATURE

Full Name (Last, First, Middle Initial)

**C. Citizens Bank**

Mailing Address West Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60119.E3145

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	6

Amount of Each Disbursement this Period

655.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

SUBTOTAL of Disbursements This Page (optional) .....

1128.55

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Bessette		<b>Transaction ID:</b> 60131.E3180 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 33 Mayflower Avenue		<b>Amount of Each Disbursement this Period</b> <div>870.37</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>
City Pawcatuck State CT Zip Code 06379-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <div>House</div> <div>Senate</div> <div>President</div> </div> </div>	
Purpose of Disbursement SALARY		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Mystic Chamber Foundation, Inc.		<b>Transaction ID:</b> 51227.E3132 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div>
Mailing Address 14 Holmes Street		<b>Amount of Each Disbursement this Period</b> <div>7900.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>DONATION</b>
City Mystic State CT Zip Code 06355-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <div>House</div> <div>Senate</div> <div>President</div> </div> </div>	
Purpose of Disbursement DONATION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Jewish Ledger		<b>Transaction ID:</b> 60119.E3149 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 740 North Main St.		<b>Amount of Each Disbursement this Period</b> <div>128.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>ADVERTISEMENT</b>
City W Hartford State CT Zip Code 06117-	<b>Category/Type</b> <div> <div>Category/Type</div> <div> <div>House</div> <div>Senate</div> <div>President</div> </div> </div>	
Purpose of Disbursement ADVERTISEMENT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**8898.37**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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)  
Simmons For Congress

<b>A. Eric Janney</b> Full Name (Last, First, Middle Initial) Mailing Address 898 Ocean Avenue City New London State CT Zip Code 06320- Purpose of Disbursement SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3179</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1169.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>
<b>B. AT&amp;T</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2971 City Omaha State NE Zip Code 68103- Purpose of Disbursement TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3192</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 72.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TELEPHONE</b>
<b>C. Wilson Grand Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 429 N. Saint Asaph Street City Alexandria State VA Zip Code 22314- Purpose of Disbursement CONSULTING FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60120.E3159</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 9000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>CONSULTING FEE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....**10242.11****TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. RBS Systems**

Mailing Address 600 Morgan Falls Road

City Atlanta State GA Zip Code 30350-

Purpose of Disbursement  
CREDIT CARD FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60330.E3279

Date of Disbursement

/   /

Amount of Each Disbursement this Period

43.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

## **B. New Media Communications**

Mailing Address Summit of Richfield II  
 3046 Brecksville Road

City Richfield State OH Zip Code 44286-

Purpose of Disbursement  
WEBSITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3127

Date of Disbursement

/   /

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WEBSITE

Full Name (Last, First, Middle Initial)

## **C. Christopher Healy**

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement  
TRAVEL/OFFICE SUPPLY REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3248

Date of Disbursement

/   /

Amount of Each Disbursement this Period

142.39

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TRAVEL/OFFICE SUPPLY REIM-  
BURSEMENT

**SUBTOTAL** of Disbursements This Page (optional) .....

311.11

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Verizon Wireless**

Mailing Address P.O. Box 489

City Newark State NJ Zip Code 07101-0489

Purpose of Disbursement  
 TELEPHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3222

Date of Disbursement

03 / 01 / 2006

Amount of Each Disbursement this Period

459.56

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TELEPHONE

Full Name (Last, First, Middle Initial)

## **B. Poland Spring**

Mailing Address 2767 E. Imperial Highway

City Brea State CA Zip Code 92821-

Purpose of Disbursement  
 WATER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E3173

Date of Disbursement

02 / 01 / 2006

Amount of Each Disbursement this Period

12.71

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

WATER

Full Name (Last, First, Middle Initial)

## **C. New Media Communications**

Mailing Address Summit of Richfield II  
 3046 Brecksville Road

City Richfield State OH Zip Code 44286-

Purpose of Disbursement  
 WEBSITE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3238

Date of Disbursement

03 / 15 / 2006

Amount of Each Disbursement this Period

125.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

WEBSITE

**SUBTOTAL** of Disbursements This Page (optional) .....

597.27

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Diane Generous		<b>Transaction ID:</b> 60119.E3156 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 172 Pautipaug Hill Road		<b>Amount of Each Disbursement this Period</b> <div>1636.34</div>	
City Baltic	State CT	Zip Code 06330-	<div>Category/ Type</div>
Purpose of Disbursement SALARY			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b> Full Name (Last, First, Middle Initial) Postmaster		<b>Transaction ID:</b> 60306.E3183 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 2 / 2 0 0 6</div> </div>	
Mailing Address Main Street		<b>Amount of Each Disbursement this Period</b> <div>140.00</div>	
City Mystic	State CT	Zip Code 06355-	<div>Category/ Type</div>
Purpose of Disbursement POST OFFICE BOX			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b> Full Name (Last, First, Middle Initial) Anthem BC/BS of CT		<b>Transaction ID:</b> 60306.E3187 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 370 Bassett Road		<b>Amount of Each Disbursement this Period</b> <div>1776.44</div>	
City North Haven	State CT	Zip Code 06473-	<div>Category/ Type</div>
Purpose of Disbursement INSURANCE			
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

**SUBTOTAL** of Disbursements This Page (optional) .....

**3552.78**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Mystic Packer Associates**

Mailing Address 12 Roosevelt Avenue

City State Zip Code  
 Mystic CT 06355-

Purpose of Disbursement  
 RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51227.E3119**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1487.56

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

RENT

Full Name (Last, First, Middle Initial)

## **B. Comm. Of Revenue Services**

Mailing Address 451 High Street

City State Zip Code  
 Hartford CT 06103-

Purpose of Disbursement  
 TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60306.E3237**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

110.47

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TAXES

Full Name (Last, First, Middle Initial)

## **C. Visa**

Mailing Address P.O. Box 151

City State Zip Code  
 Norwich CT 06360-0151

Purpose of Disbursement  
 CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60306.E3241**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39.77

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

CREDIT CARD PAYMENT

**SUBTOTAL** of Disbursements This Page (optional) .....

1637.80

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input 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)  
Simmons For Congress

<b>A. Christopher Healy</b> Full Name (Last, First, Middle Initial) Mailing Address 27 Dorchester Road City Wethersfield State CT Zip Code 06109- Purpose of Disbursement OFFICE SUPPLY REIMBURSEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3227</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 127.16 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>OFFICE SUPPLY REIMBURSEMENT</b>
<b>B. Diane Generous</b> Full Name (Last, First, Middle Initial) Mailing Address 172 Pautipaug Hill Road City Baltic State CT Zip Code 06330- Purpose of Disbursement STIPEND Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3204</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 3671.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>STIPEND</b>
<b>C. U.S. Treasury</b> Full Name (Last, First, Middle Initial) Mailing Address Rosenbaum Avenue City Washington State DC Zip Code 20003- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3235</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 168.30 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>3966.55</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. EDonation</b> Full Name (Last, First, Middle Initial) Mailing Address 228 S. Washington St. #240 City Alexandria State VA Zip Code 22314- Purpose of Disbursement SERVICE CHARGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60118.E3158</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 67.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SERVICE CHARGE</b>
<b>B. Keelen Communications</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 2776 City Arlington State VA Zip Code 22202- Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3170</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1795.21 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>FUNDRAISING EXPENSE</b>
<b>C. Aristotle International Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 50 E Street SE City Washington State DC Zip Code 20003- Purpose of Disbursement COMPUTER PROGRAM Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51227.E3124</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 2750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>COMPUTER PROGRAM</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**4612.21**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. SBC</b> Full Name (Last, First, Middle Initial) Mailing Address P.O.Box 8387 City New Haven State CT Zip Code 06530- Purpose of Disbursement TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3244</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 235.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TELEPHONE
<b>B. Susan Bessette</b> Full Name (Last, First, Middle Initial) Mailing Address 33 Mayflower Avenue City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3230</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 700.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
<b>C. U.S. Treasury</b> Full Name (Last, First, Middle Initial) Mailing Address Rosenbaum Avenue City Washington State DC Zip Code 20003- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60118.E3161</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 6 Amount of Each Disbursement this Period 209.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

**1144.94**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Christopher Healy		<b>Transaction ID:</b> 60306.E3208 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address 27 Dorchester Road		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>138.60</div> </div>	
City Wethersfield State CT Zip Code 06109-	Purpose of Disbursement TRAVEL EXPENSE	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	TRAVEL EXPENSE
<b>B.</b> Full Name (Last, First, Middle Initial) Veterans of Foreign Wars Dept. of CT		<b>Transaction ID:</b> 60306.E3182 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 1 / 2 0 0 6</div> </div>	
Mailing Address 2842 Main Street #283		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>250.00</div> </div>	
City Glastonbury State CT Zip Code 06033-	Purpose of Disbursement ADVERTISEMENT	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	ADVERTISEMENT
<b>C.</b> Full Name (Last, First, Middle Initial) Middlesex United Way		<b>Transaction ID:</b> 51227.E3136 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 1 / 2 0 0 6</div> </div>	
Mailing Address 100 Riverview Center		<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>6900.00</div> </div>	
City Middletown State CT Zip Code 06457-	Purpose of Disbursement DONATION	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DONATION

**SUBTOTAL** of Disbursements This Page (optional) .....

**7288.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Comcast Cable**

Mailing Address 401 Gold Star Highway

City Groton State CT Zip Code 06340-

Purpose of Disbursement  
OFFICE EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3245

Date of Disbursement

/   /

Amount of Each Disbursement this Period

75.81

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE EXPENSE

Full Name (Last, First, Middle Initial)

## **B. Precinct 13 LLC**

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement  
CONSULTING FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3206

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

## **C. B&A Advertising**

Mailing Address 241 Main St. P.O. Box 468

City Norwich State CT Zip Code 06360-

Purpose of Disbursement  
CAMPAIGN LITERATURE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3216

Date of Disbursement

/   /

Amount of Each Disbursement this Period

64.40

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAMPAIGN LITERATURE

**SUBTOTAL** of Disbursements This Page (optional) .....

3140.21

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Pawcatuck Neighborhood Center			<b>Transaction ID:</b> 51227.E3139 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 6 / 2 0 0 6</div> </div>	
Mailing Address Coggswell Street				
City Pawcatuck	State CT	Zip Code 06379-	Amount of Each Disbursement this Period <div>1500.00</div>	
Purpose of Disbursement DONATION		<div>Category/ Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		DONATION	
State: District:				
<b>B.</b> Full Name (Last, First, Middle Initial) Visa			<b>Transaction ID:</b> 60306.E3243 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address P.O. Box 151				
City Norwich	State CT	Zip Code 06360-0151	Amount of Each Disbursement this Period <div>500.00</div>	
Purpose of Disbursement SEE BELOW: CREDIT CARD PAYMENT		<div>Category/ Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		SEE BELOW: CREDIT CARD PA- YMENT	
State: District:				
<b>C.</b> Full Name (Last, First, Middle Initial) Politics Online			<b>Transaction ID:</b> 60330.E3254 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 5 / 2 0 0 6</div> </div>	
Mailing Address George Washington University				
City Washington	State DC	Zip Code 20006-	Amount of Each Disbursement this Period <div>500.00</div>	
Purpose of Disbursement COMPUTER CONFERENCE		<div>Category/ Type</div>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>[MEMO ITEM]</b> MEMO: COMPUTER CONFERENCE	
State: District:				

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**2000.00**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A. Mystic Packer Associates</b> Full Name (Last, First, Middle Initial) Mailing Address 12 Roosevelt Avenue City Mystic State CT Zip Code 06355- Purpose of Disbursement RENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3218</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1539.03 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 RENT
<b>B. Diane Generous</b> Full Name (Last, First, Middle Initial) Mailing Address 172 Pautipaug Hill Road City Baltic State CT Zip Code 06330- Purpose of Disbursement SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3177</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1427.38 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 SALARY
<b>C. J. Solomon Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 208 Bank Street P.O. Box 827 City New London State CT Zip Code 06320- Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3190</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 146.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

**3113.29**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Direct Mail Systems**

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 33762-

Purpose of Disbursement  
DIRECT MAIL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60119.E3151

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1485.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

DIRECT MAIL

Full Name (Last, First, Middle Initial)

## **B. Diane Generous**

Mailing Address 172 Pautipaug Hill Road

City Baltic State CT Zip Code 06330-

Purpose of Disbursement  
SALARY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 51227.E3115

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1427.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

Full Name (Last, First, Middle Initial)

## **C. Citizens Bank**

Mailing Address West Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3213

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1052.73

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

TAXES

**SUBTOTAL** of Disbursements This Page (optional) .....

3965.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Susan Bessette		<b>Transaction ID:</b> 60119.E3157 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 6</div> </div>
Mailing Address 33 Mayflower Avenue		<b>Amount of Each Disbursement this Period</b> <div>847.16</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>SALARY</b>
City Pawcatuck State CT Zip Code 06379-		
Purpose of Disbursement SALARY	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Postmaster		<b>Transaction ID:</b> 60306.E3231 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 1 / 2 0 0 6</div> </div>
Mailing Address Main Street		<b>Amount of Each Disbursement this Period</b> <div>390.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>POSTAGE</b>
City Mystic State CT Zip Code 06355-		
Purpose of Disbursement POSTAGE	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) DFS Acceptance		<b>Transaction ID:</b> 60119.E3150 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 5 / 2 0 0 6</div> </div>
Mailing Address P.O. Box 5292		<b>Amount of Each Disbursement this Period</b> <div>134.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  <b>COMPUTER LEASE</b>
City Carol Stream State IL Zip Code 60197-5292		
Purpose of Disbursement COMPUTER LEASE	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

**1371.20**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. ACCESS Agency Fuel Assistance Fund**

Mailing Address ACCESS Community Action Agency  
 1315 Main Street

City Willimantic State CT Zip Code 06226-

Purpose of Disbursement  
 DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51227.E3134**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7900.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

DONATION

Full Name (Last, First, Middle Initial)

## **B. AGJO**

Mailing Address 173 South Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
 CAMPAIGN LITERATURE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51227.E3116**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2833.03

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

CAMPAIGN LITERATURE

Full Name (Last, First, Middle Initial)

## **C. El Centro de la Comunidad**

Mailing Address 109 Blinman Street

City New London State CT Zip Code 06320-

Purpose of Disbursement  
 DONATION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 51227.E3133**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7900.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

DONATION

**SUBTOTAL** of Disbursements This Page (optional) .....

18633.03

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Precinct 13 LLC**

Mailing Address 27 Dorchester Road

City Wethersfield State CT Zip Code 06109-

Purpose of Disbursement  
CONSULTING FEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60306.E3249**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CONSULTING FEE

Full Name (Last, First, Middle Initial)

## **B. Poland Spring**

Mailing Address 2767 E. Imperial Highway

City Brea State CA Zip Code 92821-

Purpose of Disbursement  
WATER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60306.E3223**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

22.50

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

WATER

Full Name (Last, First, Middle Initial)

## **C. Citizens Bank**

Mailing Address West Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
SERVICE CHARGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: 60330.E3281**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

143.72

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SERVICE CHARGE

**SUBTOTAL** of Disbursements This Page (optional) .....

3166.22

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Adams Garden of Eden

Mailing Address 360 North Anguilla Road

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
FUNDRAISING EXPENSE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3189

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	5		2	0	0	6

Amount of Each Disbursement this Period

1060.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial)

**B.** AGJO

Mailing Address 173 South Broad Street

City Pawcatuck State CT Zip Code 06379-

Purpose of Disbursement  
CAMPAIGN LITERATURE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60131.E3168

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	6

Amount of Each Disbursement this Period

871.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CAMPAIGN LITERATURE

Full Name (Last, First, Middle Initial)

**C.** Diane Generous

Mailing Address 172 Pautipaug Hill Road

City Baltic State CT Zip Code 06330-

Purpose of Disbursement  
SALARY

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3226

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	0	6

Amount of Each Disbursement this Period

1427.38

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SALARY

SUBTOTAL of Disbursements This Page (optional) .....

3358.48

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
Simmons For Congress

Full Name (Last, First, Middle Initial)

## **A. Direct Mail Systems**

Mailing Address 12450 Automobile Boulevard

City Clearwater State FL Zip Code 33762-

Purpose of Disbursement  
POSTAGE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3211

Date of Disbursement

/   /

Amount of Each Disbursement this Period

750.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

POSTAGE

Full Name (Last, First, Middle Initial)

## **B. DFS Acceptance**

Mailing Address P.O. Box 5292

City Carol Stream State IL Zip Code 60197-5292

Purpose of Disbursement  
COMPUTER LEASE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3239

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

COMPUTER LEASE

Full Name (Last, First, Middle Initial)

## **C. J. Solomon Inc.**

Mailing Address 208 Bank Street  
P.O. Box 827

City New London State CT Zip Code 06320-

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 60306.E3240

Date of Disbursement

/   /

Amount of Each Disbursement this Period

71.90

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

OFFICE SUPPLIES

**SUBTOTAL** of Disbursements This Page (optional) .....

955.94

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

<b>A. Diane Generous</b> Full Name (Last, First, Middle Initial) Mailing Address 172 Pautipaug Hill Road City Baltic State CT Zip Code 06330- Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60131.E3176</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 174.91 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL EXPENSE</b>
<b>B. SBC</b> Full Name (Last, First, Middle Initial) Mailing Address P.O.Box 8387 City New Haven State CT Zip Code 06530- Purpose of Disbursement TELEPHONE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51227.E3125</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 226.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TELEPHONE</b>
<b>C. New Media Communications</b> Full Name (Last, First, Middle Initial) Mailing Address Summit of Richfield II 3046 Brecksville Road City Richfield State OH Zip Code 44286- Purpose of Disbursement WEBSITE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60119.E3153</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>WEBSITE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**526.81**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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<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)  
Simmons For Congress

<b>A. Eric Janney</b> Full Name (Last, First, Middle Initial) Mailing Address 898 Ocean Avenue City New London State CT Zip Code 06320- Purpose of Disbursement OFFICE SUPPLY REIMBURSEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3247</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 30.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>OFFICE SUPPLY REIMBURSEMENT</b>
<b>B. Eric Janney</b> Full Name (Last, First, Middle Initial) Mailing Address 898 Ocean Avenue City New London State CT Zip Code 06320- Purpose of Disbursement SALARY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51227.E3113</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1169.63 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>SALARY</b>
<b>C. Comm. Of Revenue Services</b> Full Name (Last, First, Middle Initial) Mailing Address 451 High Street City Hartford State CT Zip Code 06103- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60306.E3214</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 159.04 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>1359.39</b>
<b>TOTAL</b> This Period (last page this line number only) .....		

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
Simmons For Congress

<b>A. Citizens Bank</b> Full Name (Last, First, Middle Initial) Mailing Address West Broad Street City Pawcatuck State CT Zip Code 06379- Purpose of Disbursement TAXES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51227.E3111</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 1012.24 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TAXES</b>
<b>B. Anthem BC/BS of CT</b> Full Name (Last, First, Middle Initial) Mailing Address 370 Bassett Road City North Haven State CT Zip Code 06473- Purpose of Disbursement INSURANCE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 60308.E3252</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 6 Amount of Each Disbursement this Period 888.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>INSURANCE</b>
<b>C. Diane Generous</b> Full Name (Last, First, Middle Initial) Mailing Address 172 Pautipaug Hill Road City Baltic State CT Zip Code 06330- Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: 51227.E3118</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 1 / 2 0 0 6 Amount of Each Disbursement this Period 28.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>TRAVEL EXPENSE</b>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1928.59**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)  
 Simmons For Congress

Full Name (Last, First, Middle Initial)

**A.** Diane Generous

Mailing Address 172 Pautipaug Hill Road

City State Zip Code  
 Baltic CT 06330-

Purpose of Disbursement  
 TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60306.E3203

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TRAVEL EXPENSE

Full Name (Last, First, Middle Initial)

**B.** AT&T

Mailing Address P.O. Box 2971

City State Zip Code  
 Omaha NE 68103-

Purpose of Disbursement  
 TELEPHONE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60119.E3155

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TELEPHONE

Full Name (Last, First, Middle Initial)

**C.** Eric Janney

Mailing Address 898 Ocean Avenue

City State Zip Code  
 New London CT 06320-

Purpose of Disbursement  
 TRAVEL EXPENSE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 60131.E3178

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

TRAVEL EXPENSE

**SUBTOTAL** of Disbursements This Page (optional) .....

**534.82**

**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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NAME OF COMMITTEE (In Full)  
Simmons For Congress

A. Full Name (Last, First, Middle Initial)  
Visa

Mailing Address P.O. Box 151

City State Zip Code  
Norwich CT 06360-0151

Purpose of Disbursement  
CREDIT CARD PAYMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 51227.E3130

Date of Disbursement

/   /

Amount of Each Disbursement this Period

132.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

CREDIT CARD PAYMENT

SUBTOTAL of Disbursements This Page (optional) .....

132.10

TOTAL This Period (last page this line number only) .....

144527.20