

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

Courtney for Congress

ADDRESS (number and street) PO Box 1372

Check if different than previously reported. (ACC)

Vernon CT 06066

2. **FEC IDENTIFICATION NUMBER** C00410233

CITY STATE ZIP CODE STATE DISTRICT

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

CT 02

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 11 04 2008 in the State of CT

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

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

Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

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 Tim Poloski

Signature of Treasurer Electronically Filed by Tim Poloski Date 02 05 2009

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Courtney for Congress

Report Covering the Period:

From:

M M
1 0

D D
0 1

Y Y Y Y
2 0 0 8

To:

M M
1 0

D D
1 5

Y Y Y Y
2 0 0 8

	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)).....	56202.54	2249385.03
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	4484.55
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	56202.54	2244900.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	497509.98	1663511.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	10660.14
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	497509.98	1652851.67
8. Cash on Hand at Close of Reporting Period (from Line 27).....	682286.57	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Courtney for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

18735.00

1127449.45

(ii) Unitemized.....

7281.18

199209.57

(iii) TOTAL of contributions

26016.18

1326659.02

from individuals..... ▶

0.00

1485.52

(b) Political Party Committees.....

30186.36

921240.49

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

56202.54

2249385.03

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

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

0.00

4750.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

0.00

10660.14

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

0.00

21147.30

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

56202.54

2285942.47

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	497509.98	1663511.81
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	3810.00
(b) Political Party Committees.....	0.00	74.55
(c) Other Political Committees (such as PACs).....	0.00	600.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4484.55
21. OTHER DISBURSEMENTS.....	0.00	3000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	497509.98	1670996.36

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1123594.01
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	56202.54
25. SUBTOTAL (add Line 23 and Line 24).....	1179796.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	497509.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	682286.57

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 56

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Jonathan Abels

Mailing Address 45 Howland Rd

City State Zip Code
West Hartford CT 06107-3114

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Self Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 09 / 2008

Transaction ID: C17762053

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Rita Berkson

Mailing Address 113 Linden Ave.

City State Zip Code
Branford CT 06405

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Self Management Consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 14 / 2008

Transaction ID: C17770228

Amount of Each Receipt this Period
100.00

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

C.

Full Name (Last, First, Middle Initial)
Phillip Blumberg

Mailing Address 791 Prospect Ave Apt B5

City State Zip Code
Hartford CT 06105-4248

FEC ID number of contributing federal political committee. C

Name of Employer Univ of CT Law School Occupation
Univ of CT Law School Professor

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 07 / 2008

Transaction ID: C17758917

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) 850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Shari Cantor		Date of Receipt
	Mailing Address 19 Foxcroft Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 07 / 2008
	City	State	Zip Code
	West Hartford	CT	06119
	FEC ID number of contributing federal political committee. C		Transaction ID: C17758873
Name of Employer NA		Occupation Volunteer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 100.00
		<input type="text"/> 400.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Richard Thomas Carbray, Jr		Date of Receipt
	Mailing Address 18 Foxbriar Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 14 / 2008
	City	State	Zip Code
	Rocky Hill	CT	06067
	FEC ID number of contributing federal political committee. C		Transaction ID: C17772965
Name of Employer Apex Pharmacy		Occupation Pharmacist	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Kevin J Cavanagh		Date of Receipt
	Mailing Address 14 Greenway Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 11 / 2008
	City	State	Zip Code
	New London	CT	06320
	FEC ID number of contributing federal political committee. C		Transaction ID: C17765046
Name of Employer City of New London		Occupation Councilman	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 70.00
		<input type="text"/> 828.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 420.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 56
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Willard Colburn		Date of Receipt
	Mailing Address 36 Ridge Road		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Storrs	CT	06268
	FEC ID number of contributing federal political committee. C		Transaction ID: C17770208
Name of Employer Walgreen's Pharmacy		Occupation Pharmacist	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="1050.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Donald Courtney		Date of Receipt
	Mailing Address 15 Thaxter Road		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Newton	MA	02460
	FEC ID number of contributing federal political committee. C		Transaction ID: C17770200
Name of Employer Sun microsystems		Occupation software engineer	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="50.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="1100.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Ellen Cummings		Date of Receipt
	Mailing Address 901 Pequot Ave		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	New London	CT	06320
	FEC ID number of contributing federal political committee. C		Transaction ID: C17758883
Name of Employer Information Requested		Occupation Information Requested	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text" value="200.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="300.00"/>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 56
(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Stephen Davis

Mailing Address 110 Overshore Drive East

City Madison State CT Zip Code 06443

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

Name of Employer Yale University Occupation Project Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1900.00

Date of Receipt 10 / 03 / 2008
Transaction ID: C17748338
 Amount of Each Receipt this Period 1000.00

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

B.

Full Name (Last, First, Middle Initial)
William Davis

Mailing Address 2 Biltmore Park

City Bloomfield State CT Zip Code 06002

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

Name of Employer Riscassi Davis Occupation Attorney

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1100.00

Date of Receipt 10 / 15 / 2008
Transaction ID: C17777938
 Amount of Each Receipt this Period 250.00

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

C.

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

Mailing Address 28 Ladd Road

City Ellington State CT Zip Code 06029

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

Name of Employer Self-Employed Occupation Software Engineer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1350.00

Date of Receipt 10 / 01 / 2008
Transaction ID: C17744416
 Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) edward demuzzio	Date of Receipt MM / DD / YYYY 10 / 09 / 2008
	Mailing Address 190 Broad St	Transaction ID: C17762072
	City State Zip Code New London CT 06320-5367	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer CCI, Inc Occupation Owner Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1100.00	

B.	Full Name (Last, First, Middle Initial) Raymond Devlin	Date of Receipt MM / DD / YYYY 10 / 06 / 2008
	Mailing Address 100 Pearl St 14th Flr	Transaction ID: C17754701
	City State Zip Code Hartford CT 06103	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Self Employed Occupation Attorney Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Karl Dudek	Date of Receipt MM / DD / YYYY 10 / 15 / 2008
	Mailing Address 20 Tyler Rd	Transaction ID: C17802080
	City State Zip Code Enfield CT 06082	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Kason Credit Corporation Occupation President Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	1450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

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

Mailing Address 23 Viola Dr

City East Hampton State CT Zip Code 06424

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

Name of Employer Guinan & Associates Occupation Lobbyist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 14 / 2008
Transaction ID: C17770210
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 64 Ash Swamp Road

City Glastonbury State CT Zip Code 06033

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

Name of Employer Beck & Eldergill, P.C. Occupation lawyer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 875.00

Date of Receipt 10 / 01 / 2008
Transaction ID: C17745741
 Amount of Each Receipt this Period 500.00

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

C. Full Name (Last, First, Middle Initial)
mary J. elia

Mailing Address 1 Templeton Street

City West Haven State CT Zip Code 06516

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

Name of Employer AFTCT Occupation consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 285.00

Date of Receipt 10 / 15 / 2008
Transaction ID: C17777317
 Amount of Each Receipt this Period 15.00

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

SUBTOTAL of Receipts This Page (optional) ► **765.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 56
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Patricia Farrell

Mailing Address 677 Pine St.

City Middletown State CT Zip Code 06457

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

Name of Employer Farrell Guarino & Boccalatte PC Occupation Attorney

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 09 / 2008

Transaction ID: C17762074

Amount of Each Receipt this Period 500.00

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

875.00

B.

Full Name (Last, First, Middle Initial)
Joyce Giedraitis

Mailing Address 76 Washington St.

City Vernon State CT Zip Code 06066

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

Name of Employer Self Occupation Housewife

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 14 / 2008

Transaction ID: C17770205

Amount of Each Receipt this Period 200.00

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

1170.00

C.

Full Name (Last, First, Middle Initial)
Kenneth M. Goldsmith

Mailing Address 75 Route 197

City Woodstock State CT Zip Code 06281

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

Name of Employer American Airlines Occupation Pilot

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt 10 / 05 / 2008

Transaction ID: C17751828

Amount of Each Receipt this Period 250.00

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

250.00

SUBTOTAL of Receipts This Page (optional) ► **950.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
Joanna Monica Gwozdzowski

Mailing Address 15 Stamford Avenue

City State Zip Code
Stamford CT 06902

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

Name of Employer Occupation
Self-employed international affairs consultant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: C17777949

Amount of Each Receipt this Period
250.00

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

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

Mailing Address P.O. Box 190

City State Zip Code
Old Lyme CT 06371

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

Name of Employer Occupation
Self Employed Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: C17763445

Amount of Each Receipt this Period
300.00

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

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

Mailing Address 5 Cord Grass Ln

City State Zip Code
Old Lyme CT 06371

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: C17746642

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **1550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

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

Mailing Address 740 Ocean Avenue

City State Zip Code
New London CT 06320

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

Name of Employer NA Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
500.00

Transaction ID: C17746621

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

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

Mailing Address P.O. Box 6

City State Zip Code
Haddam CT 06438-0006

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

Name of Employer Middlesex Hospital Occupation Medical Social Worker

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
100.00

Transaction ID: C17758898

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

C. Full Name (Last, First, Middle Initial)
Julian Anthony Haywood

Mailing Address 502 H ST SW

City State Zip Code
Washington DC 20024

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

Name of Employer Heather Podesfa + Partners LLC Occupation Lobbyist

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Amount of Each Receipt this Period
200.00

Transaction ID: C17777251

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
Mary Ellen Killeen

Mailing Address 33 Spring Garden Road

City Enfield State CT Zip Code 06082

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

Name of Employer NA Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 02 / 2008
Transaction ID: C17746631
 Amount of Each Receipt this Period 250.00

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

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

Mailing Address 34 Stratford Road

City West Hartford State CT Zip Code 06117

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

Name of Employer university of connecticut school of la Occupation law professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 06 / 2008
Transaction ID: C17753082
 Amount of Each Receipt this Period 100.00

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

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

Mailing Address P.O. Box 795

City Willimantic State CT Zip Code 06226

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

Name of Employer Self Occupation Writer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2008
Transaction ID: C17746616
 Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 56

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

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

Mailing Address 23 Worthington Road

City State Zip Code
New London CT 06320-2932

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

Name of Employer
Levin, Powers, Brennan & Shea LLC

Occupation
Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: C17794143

Amount of Each Receipt this Period

100.00

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

B.

Full Name (Last, First, Middle Initial)
Jan F Lindberg

Mailing Address 86 Williams Street

City State Zip Code
Norwich CT 06360

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

Name of Employer
NUWC Newport

Occupation
Physicist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 8

Transaction ID: C17758878

Amount of Each Receipt this Period

250.00

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

C.

Full Name (Last, First, Middle Initial)
James C Lynn

Mailing Address 32 Flying Cloud Rd

City State Zip Code
Stamford CT 06901

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

Name of Employer
Old Greenwich Investment

Occupation
Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: C17795441

Amount of Each Receipt this Period

1000.00

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

SUBTOTAL of Receipts This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 56
(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial) Bruce Morris		Date of Receipt MM / DD / YYYY 10 / 08 / 2008
Mailing Address 135 Pawson Park Road		Transaction ID: C17759385
City Branford	State CT	Zip Code 06405-5035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Robert Nastri, Jr.		Date of Receipt MM / DD / YYYY 10 / 15 / 2008
Mailing Address 554 Busk Ct		Transaction ID: C17777869
City Cheshire	State CT	Zip Code 06410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Tinley Nastri RENEHZA & DOST	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Jeffrey Nicholas		Date of Receipt MM / DD / YYYY 10 / 02 / 2008
Mailing Address 160 Hard Hill Rd N		Transaction ID: C17746639
City Bethlehem	State CT	Zip Code 06751
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Nicholas Law Firm, LLC	Occupation attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 17 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

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

Mailing Address 20 Dorchester Rd

City State Zip Code
Wethersfield CT 06109

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	8

Transaction ID: C17794149

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 131 Tryon Street

City State Zip Code
South Glastonbury CT 06073-2023

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

Name of Employer Noel's Market Occupation Owner/Manager

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	5		2	0	0	8

Transaction ID: C17794139

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 9 Laurel Glen Road

City State Zip Code
Quaker Hill CT 06375

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

Name of Employer American Federation of Teachers, CT Occupation President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

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

Transaction ID: C17745878

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional) ► **550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Barbara W. Parson		Date of Receipt
	Mailing Address 61 Shore Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 07 / 2008
	City	State	Zip Code
	Clinton	CT	06413
	FEC ID number of contributing federal political committee. C		Transaction ID: C17758879
Name of Employer N/A		Occupation homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2200.00
		<input type="text"/> 4200.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Charles Poppo		Date of Receipt
	Mailing Address 200 Flanders Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 10 / 2008
	City	State	Zip Code
	Coventry	CT	06238
	FEC ID number of contributing federal political committee. C		Transaction ID: C17763460
Name of Employer Self		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 600.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Alice Pritchard		Date of Receipt
	Mailing Address 37 South Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2008
	City	State	Zip Code
	Bolton	CT	06043
	FEC ID number of contributing federal political committee. C		Transaction ID: C17777928
Name of Employer CT Women's Education and Legal Fund		Occupation Executive Director	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 125.00
		<input type="text"/> 225.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2575.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 56

(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Joan E Prugh

Mailing Address 83 Charles Lane

City State Zip Code
Storrs CT 06268

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation
Therapist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 425.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: C17762093

Amount of Each Receipt this Period 75.00

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

B.

Full Name (Last, First, Middle Initial)
Heather Ricker-Gilbert

Mailing Address 70 Tolland Green

City State Zip Code
Tolland CT 06841

FEC ID number of contributing federal political committee. C

Name of Employer Manchester Community College Occupation
professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: C17763465

Amount of Each Receipt this Period 125.00

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

C.

Full Name (Last, First, Middle Initial)
Toni Robinson

Mailing Address P.O. Box 307

City State Zip Code
Essex CT 06426

FEC ID number of contributing federal political committee. C

Name of Employer Quinnipiac University School of Law Occupation
Law Professor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: C17760079

Amount of Each Receipt this Period 250.00

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

SUBTOTAL of Receipts This Page (optional) 450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

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

Mailing Address 623 Lake Ave

City State Zip Code
Greenwich CT 06830

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

Name of Employer Occupation
Equinox Capital President

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: C17774627

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 175 Ferry Rd #18

City State Zip Code
Old Saybrook CT 06475

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

Name of Employer Occupation
Self Real Estate

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 0 8

Transaction ID: C17746599

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 41 Alfred Drive

City State Zip Code
Tolland CT 06084

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

Name of Employer Occupation
Self Builder/Developer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: C17762058

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 56
(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial) Al Shehadi		Date of Receipt MM / DD / YYYY 10 / 02 / 2008
Mailing Address 27 Byram Shore Rd		Transaction ID: C17746638
City Greenwich	State Zip Code CT 06830-6905	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer National Trust Community Investment Co	Occupation Real Estate Finance	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Brian T Smith		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
Mailing Address 199 South Main Street		Transaction ID: C17762082
City Colchester	State Zip Code CT 06415	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Unemployed	Occupation Marketing	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

C.

Full Name (Last, First, Middle Initial) Michael Bryant Smith		Date of Receipt MM / DD / YYYY 10 / 06 / 2008
Mailing Address 69 Eldredge Road		Transaction ID: C17753064
City Willington	State Zip Code CT 06279	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer University of Connecticut	Occupation Professor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1075.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 56
(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial) Thomas Staley		Date of Receipt MM / DD / YYYY 10 / 07 / 2008
Mailing Address 1146 Fox Hill Road		Transaction ID: C17758905
City Cheshire	State CT	Zip Code 06410
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Self Employed	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) William Stanley		Date of Receipt MM / DD / YYYY 10 / 09 / 2008
Mailing Address 292 Pequot Ave Unit 1M		Transaction ID: C17762065
City New London	State CT	Zip Code 06320-4451
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer Lawrence & Memorial Hosp	Occupation VP	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1100.00	

C.

Full Name (Last, First, Middle Initial) Phyllis Starkel		Date of Receipt MM / DD / YYYY 10 / 06 / 2008
Mailing Address 239 Rte 87		Transaction ID: C17753085
City Columbia	State CT	Zip Code 06237
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer retired	Occupation Volunteer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 56
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial) David Sumner		Date of Receipt MM / DD / YYYY 10 / 06 / 2008
Mailing Address 684 Cedar Swamp Rd		Transaction ID: C17753084
City Coventry	State CT	Zip Code 06238
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer American Radio Relay League, Inc.	Occupation CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 525.00	

B.

Full Name (Last, First, Middle Initial) Frank Troiano		Date of Receipt MM / DD / YYYY 10 / 03 / 2008
Mailing Address 1408 Enfield St		Transaction ID: C17748342
City Enfield	State CT	Zip Code 06082
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Anthony Troiano & Sons Inc	Occupation Information Requested	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) Valdis Vinkels		Date of Receipt MM / DD / YYYY 10 / 14 / 2008
Mailing Address 3160 South Street		Transaction ID: C17770367
City Coventry	State CT	Zip Code 06038
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer Self	Occupation Attorney	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 425.00	

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 56
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Barbara Wareck	Date of Receipt MM / DD / YYYY 10 / 07 / 2008
	Mailing Address 135 Cliff St	Transaction ID: C17758882
	City State Zip Code New Haven CT 06511-1210	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Retired Occupation Retired Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00	

B.	Full Name (Last, First, Middle Initial) Catherine Conover	Date of Receipt MM / DD / YYYY 10 / 06 / 2008
	Mailing Address 2715 M Street NW, #300	Transaction ID: C17753140
	City State Zip Code Washington DC 20007	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer self-employed Occupation investor Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 300.00	* Earmarked Contribution: See Below

C.	Full Name (Last, First, Middle Initial) League of Conservation Voters	Date of Receipt MM / DD / YYYY 10 / 06 / 2008
	Mailing Address 1920 L Street NW Suite 800	Transaction ID: C17753140B
	City State Zip Code Wahington DC 20037	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C C30000103	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation Conduit total listed in Agg. field Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 551.18	[MEMO ITEM] Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	18735.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 56
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
American Academy of Ophthalmology PAC

Mailing Address 655 Beach Street

City State Zip Code
San Francisco CA 94109

FEC ID number of contributing federal political committee. **C** C00196246

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: C17775006

Amount of Each Receipt this Period
5000.00

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

B. Full Name (Last, First, Middle Initial)
American Psychiatric Association PAC

Mailing Address 1000 Wilson Boulevard Suite 1825

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00373696

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 0 8

Transaction ID: C17761304

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Anheuser-Busch Co. Inc. PAC

Mailing Address One Busch Place 202-5

City State Zip Code
St. Louis MO 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5267.12

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 8

Transaction ID: C17811818

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **7000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 56
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Boeing PAC

Mailing Address 1200 Wilson Blvd

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: C17770201

Amount of Each Receipt this Period
2500.00

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

B.

Full Name (Last, First, Middle Initial)
Bricklayers and Allied Craftworkers PAC

Mailing Address 620 F Street, NW

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00357301

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 0 8

Transaction ID: C17753136

Amount of Each Receipt this Period
2500.00

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

C.

Full Name (Last, First, Middle Initial)
Columbia Democratic Town Committee

Mailing Address 15 Columbia Landing

City State Zip Code
Columbia CT 06237

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: C17762090

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ► **5250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 56

(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)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Connecticut Independent Utility Workers PAC

Mailing Address P.O. Box 380485

City State Zip Code
East Hartford CT 06138

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
536.36

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 8

Transaction ID: C17770243

Amount of Each Receipt this Period

536.36

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

B.

Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA

Mailing Address 601 Pennsylvania Avenue NW
South Building Suite 600

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 8

Transaction ID: C17761607

Amount of Each Receipt this Period

2000.00

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

C.

Full Name (Last, First, Middle Initial)
Democrats for Eastern Connecticut

Mailing Address 44 Crestview

City State Zip Code
Colchester CT 06415

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
265.00

Date of Receipt

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

Transaction ID: C17754705

Amount of Each Receipt this Period

100.00

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

SUBTOTAL of Receipts This Page (optional)

2636.36

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
Larson for Congress

Mailing Address 29 RUFF CIRCLE

City State Zip Code
GLASTONBURY CT 06033

FEC ID number of contributing federal political committee. **C** C00330142

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 6 / 2 0 0 8

Transaction ID: C17754710

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Madison Democratic Town Committee

Mailing Address P.O. Box 108

City State Zip Code
Madison CT 06443

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 8

Transaction ID: C17801484

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
McKesson Corporate Employee Political Fund

Mailing Address c/o
One Post St 34th Flr

City State Zip Code
San Francisco CA 94104

FEC ID number of contributing federal political committee. **C** C00108035

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 8

Transaction ID: C17811839

Amount of Each Receipt this Period
3000.00

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

SUBTOTAL of Receipts This Page (optional) ► 6000.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 56
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
Mortgage Bankers Association PAC

Mailing Address 1919 Pennsylvania Ave NW
8th Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 0 / 2 0 0 8

Transaction ID: C17763479

Amount of Each Receipt this Period
1500.00

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

B. Full Name (Last, First, Middle Initial)
National Committee for an Effective Congress

Mailing Address 122 C Street NW Suite 650

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00003558

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 2 / 2 0 0 8

Transaction ID: C17746760

Amount of Each Receipt this Period
2500.00

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

* In-Kind: Precinct Targeting

C. Full Name (Last, First, Middle Initial)
National Committee for an Effective Congress

Mailing Address 122 C Street NW Suite 650

City State Zip Code
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00003558

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 2 / 2 0 0 8

Transaction ID: C17746761

Amount of Each Receipt this Period
500.00

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

* In-Kind: Demographic Targeting

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 56
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A. Full Name (Last, First, Middle Initial)
PhRMA Better Government Committee

Mailing Address 950 F Street NW Suite 300

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00021972

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 11 / 2008
Transaction ID: C17765008

Amount of Each Receipt this Period: 1000.00

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

B. Full Name (Last, First, Middle Initial)
Pullman & Comley PAC

Mailing Address 850 Main Street
P.O. Box 7006

City Bridgeport State CT Zip Code 06601

FEC ID number of contributing federal political committee. **C** C00230201

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt: 10 / 02 / 2008
Transaction ID: C17746647

Amount of Each Receipt this Period: 300.00

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

C. Full Name (Last, First, Middle Initial)
St. Paul Travelers Companies Inc. PAC

Mailing Address One Tower Square

City Hartford State CT Zip Code 06183

FEC ID number of contributing federal political committee. **C** C00376376

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

Date of Receipt: 10 / 15 / 2008
Transaction ID: C17811854

Amount of Each Receipt this Period: 3500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4800.00

TOTAL This Period (last page this line number only) ► 30186.36

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 32 / 56

<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)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) ADP Mailing Address 225 Second Avenue City Waltham State MA Zip Code 02454 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335110 Date of Disbursement 10 / 03 / 2008 Amount of Each Disbursement this Period 4300.81 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) ADP Mailing Address 225 Second Avenue City Waltham State MA Zip Code 02454 Purpose of Disbursement Bookkeeping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D338642 Date of Disbursement 10 / 08 / 2008 Amount of Each Disbursement this Period 82.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Anthem Blue Cross Blue Shield Mailing Address 370 Bassett Road City North Haven State CT Zip Code 06473 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335090 Date of Disbursement 10 / 01 / 2008 Amount of Each Disbursement this Period 392.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4775.61

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address P.O. Box 8110</p> <p>City Aurora State IL Zip Code 60507-8110</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D335116</p> <p>Date of Disbursement 10 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1144.22</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address P.O. Box 8110</p> <p>City Aurora State IL Zip Code 60507-8110</p> <p>Purpose of Disbursement Phone Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D338683</p> <p>Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 390.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Boston Vernon II LLC</p> <p>Mailing Address 715 Boylston Street</p> <p>City Boston State MA Zip Code 02116</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D335080</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 650.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2184.39

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Mr. Andrew Bray Mailing Address 12 Broadway City Colchester State CT Zip Code 06415 Purpose of Disbursement Wages: Fuel Allowance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335083 Date of Disbursement 10 / 01 / 2008	Amount of Each Disbursement this Period 350.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Brian Smith Mailing Address 199 South Main Street City Colchester State CT Zip Code 06415-1466 Purpose of Disbursement Rent Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335078 Date of Disbursement 10 / 01 / 2008	Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Brian Smith Mailing Address 199 South Main Street City Colchester State CT Zip Code 06415-1466 Purpose of Disbursement Utilities Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335079 Date of Disbursement 10 / 01 / 2008	Amount of Each Disbursement this Period 187.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

1537.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Brian Smith

Mailing Address 199 South Main Street

City Colchester State CT Zip Code 06415-1466

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335093
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

158.68

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

B.

Full Name (Last, First, Middle Initial)
Brian Smith

Mailing Address 199 South Main Street

City Colchester State CT Zip Code 06415-1466

Purpose of Disbursement
Utilities

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D338649
Date of Disbursement

10 / 14 / 2008

Amount of Each Disbursement this Period

86.35

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

C.

Full Name (Last, First, Middle Initial)
Erin Clark

Mailing Address 122 Chestnut Hill Road

City Colchester State CT Zip Code 06415

Purpose of Disbursement
Wages: Fuel Allowance

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335082
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

250.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

495.03

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 Detailed Summary Page

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) CT DEMOCRATIC STATE CENTRAL COMMITTEE</p> <p>Mailing Address 179 Allyn Street</p> <p>City Hartford State CT Zip Code 06103</p> <p>Purpose of Disbursement Ad Book</p> <p>Candidate Name CT DEMOCRATIC STATE CENTRAL COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D335131</p> <p>Date of Disbursement</p> <p>10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period</p> <p>500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Dixon Davis Media</p> <p>Mailing Address 1028 33rd St, NW Suite 300</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D338644</p> <p>Date of Disbursement</p> <p>10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period</p> <p>30610.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Dixon Davis Media</p> <p>Mailing Address 1028 33rd St, NW Suite 300</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D335086</p> <p>Date of Disbursement</p> <p>10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period</p> <p>76879.39</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>107989.39</p>
<p>TOTAL This Period (last page this line number only)</p>	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Matthew S. Gianquinto	Transaction ID: D335089 Date of Disbursement 10 / 01 / 2008
	Mailing Address 215 Oxford St	Amount of Each Disbursement this Period 50.00
	City Hartford State CT Zip Code 06105	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages: Fuel Allowance Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Matthew S. Gianquinto	Transaction ID: D335081 Date of Disbursement 10 / 01 / 2008
	Mailing Address 215 Oxford St	Amount of Each Disbursement this Period 250.00
	City Hartford State CT Zip Code 06105	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Wages: Fuel Allowance Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

C.	Full Name (Last, First, Middle Initial) Jill Clark Makeup	Transaction ID: D338687 Date of Disbursement 10 / 14 / 2008
	Mailing Address 93 Strobel Rd	Amount of Each Disbursement this Period 500.00
	City Trumbull State CT Zip Code 06611	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Advertising Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		004 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) Kieloch Consulting, Inc.</p> <p>Mailing Address 400 C Street NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Consultant: Fundraising Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D335095 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 3000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Media Strategies and Research</p> <p>Mailing Address 1580 Lincoln Street, Suite 510</p> <p>City Denver State CO Zip Code 80203</p> <p>Purpose of Disbursement Media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D337750 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 351588.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Mission Control, Inc</p> <p>Mailing Address 201 Adams Street</p> <p>City Manchester State CT Zip Code 06040</p> <p>Purpose of Disbursement Photos</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D335096 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 880.92</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	355468.92
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) National Committee for an Effective Congress</p> <p>Mailing Address 122 C Street NW Suite 650</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Precinct Targeting</p> <p>Candidate Name National Committee for an Effective Congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D333963</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* In-Kind Received</p>
<p>B. Full Name (Last, First, Middle Initial) National Committee for an Effective Congress</p> <p>Mailing Address 122 C Street NW Suite 650</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Demographic Targeting</p> <p>Candidate Name National Committee for an Effective Congress</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D333964</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>* In-Kind Received</p>
<p>C. Full Name (Last, First, Middle Initial) National Multiple Sclerosis Society CT Chapter</p> <p>Mailing Address 659 Tower Ave First Floor</p> <p>City Hartford State CT Zip Code 06112</p> <p>Purpose of Disbursement Ad Book</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: D338686</p> <p>Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	3250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 5505 Connecticut Avenue, NW <hr/> City Washington State DC Zip Code 20015 <hr/> Purpose of Disbursement Website Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335113 Date of Disbursement 10 / 06 / 2008 <hr/> 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.	Full Name (Last, First, Middle Initial) NGP Software <hr/> Mailing Address 5505 Connecticut Avenue, NW <hr/> City Washington State DC Zip Code 20015 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335085 Date of Disbursement 10 / 01 / 2008 <hr/> Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Rockville Bank <hr/> Mailing Address P.O. Box 660 <hr/> City Rockville State CT Zip Code 06066 <hr/> Purpose of Disbursement Service Charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D338640 Date of Disbursement 10 / 08 / 2008 <hr/> Amount of Each Disbursement this Period 7.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1897.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) Rockville Bank</p> <p>Mailing Address P.O. Box 660</p> <p>City Rockville State CT Zip Code 06066</p> <p>Purpose of Disbursement Service Charge Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D338654 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 20.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Mr. Lon J Seidman</p> <p>Mailing Address 76 Bushy Hill Rd</p> <p>City Ivoryton State CT Zip Code 06442</p> <p>Purpose of Disbursement Wages: Fuel Allowance Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D335084 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Suntrust Merchant Services</p> <p>Mailing Address P.O. Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Credit Card Processing Fees Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D338647 Date of Disbursement 10 / 14 / 2008</p> <p>Amount of Each Disbursement this Period 958.77</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1378.77

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Suntrust Merchant Services Mailing Address P.O. Box 6600 City Hagerstown State MD Zip Code 21741 Purpose of Disbursement Credit Card Processing Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335111 Date of Disbursement 10 / 06 / 2008 Amount of Each Disbursement this Period 325.11 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) SVM, LLP Mailing Address 999 E Touhy Ave Suite 250 City Des Plaines State IL Zip Code 60018 Purpose of Disbursement Fuel Cards Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D338681 Date of Disbursement 10 / 06 / 2008 Amount of Each Disbursement this Period 1060.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) U.S. Treasury Mailing Address 1500 Pennsylvania Avenue , NW City Washington State DC Zip Code 20003 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D335130 Date of Disbursement 10 / 06 / 2008 Amount of Each Disbursement this Period 538.64 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1924.70
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
First Equity Card

Mailing Address P.O. Box 23029

City State Zip Code
Columbus GA 31902

Purpose of Disbursement
Credit Card Payment, see below

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D335088
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

6956.12

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

B.

Full Name (Last, First, Middle Initial)
Ace Printery

Mailing Address 41 Walnut Street

City State Zip Code
Hartford CT 06120

Purpose of Disbursement
Printing

Candidate Name

001
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D342948
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

865.23

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Denver Marriott Tech Center

Mailing Address 4900 S. Syracuse Street

City State Zip Code
Denver CO 80237

Purpose of Disbursement
Travel Expense: Hotel Accommodation

Candidate Name

002
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D342960
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

906.16

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

6956.12

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Exxon Mobil	Transaction ID: D342946 Date of Disbursement 10 / 01 / 2008
	Mailing Address 1292 Hartford Turnpike	Amount of Each Disbursement this Period 22.93
	City Vernon State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense: Fuel Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mystic Mariott	Transaction ID: D342978 Date of Disbursement 10 / 01 / 2008
	Mailing Address 625 North Road (RT 117)	Amount of Each Disbursement this Period 75.60
	City Groton State CT Zip Code 06340	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Food and Beverage Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Radisson Lexington Hotel	Transaction ID: D342990 Date of Disbursement 10 / 01 / 2008
	Mailing Address 511 Lexington Avenue	Amount of Each Disbursement this Period 234.24
	City New York State NY Zip Code 10017	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Travel Expense: Hotel Accomodation Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 35 Talcottville Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342927
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

43.33

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 35 Talcottville Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342929
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

127.18

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 35 Talcottville Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342932
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

27.55

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D342934 Date of Disbursement 10 / 01 / 2008
	Mailing Address 35 Talcottville Road	Amount of Each Disbursement this Period 197.11
	City Vernon State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D342935 Date of Disbursement 10 / 01 / 2008
	Mailing Address 35 Talcottville Road	Amount of Each Disbursement this Period 54.27
	City Vernon State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: D342939 Date of Disbursement 10 / 01 / 2008
	Mailing Address 35 Talcottville Road	Amount of Each Disbursement this Period -79.47
	City Vernon State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office Supplies Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 35 Talcottville Road</p> <p>City Vernon State CT Zip Code 06066</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342940 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 55.40</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 35 Talcottville Road</p> <p>City Vernon State CT Zip Code 06066</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342942 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 132.36</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 35 Talcottville Road</p> <p>City Vernon State CT Zip Code 06066</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342943 Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 36.03</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 35 Talcottville Road

City State Zip Code
Vernon CT 06066

Purpose of Disbursement
Office Supplies

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342944
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

100.67

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E. Sky harbor Blvd.

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement
Travel Expense: Air Fare

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342958
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

398.50

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
US Airways

Mailing Address 4000 E. Sky harbor Blvd.

City State Zip Code
Phoenix AZ 85034

Purpose of Disbursement
Travel Expense: Air Fare

Candidate Name

002
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342959
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

25.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) USPS - Colchester	Transaction ID: D342919 Date of Disbursement 10 / 01 / 2008
	Mailing Address 103 S Main	Amount of Each Disbursement this Period 42.00
	City Colchester State CT Zip Code 06415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) USPS - Vernon	Transaction ID: D342905 Date of Disbursement 10 / 01 / 2008
	Mailing Address 141 Union Street	Amount of Each Disbursement this Period 336.00
	City Vernon Rockville State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) USPS - Vernon	Transaction ID: D342906 Date of Disbursement 10 / 01 / 2008
	Mailing Address 141 Union Street	Amount of Each Disbursement this Period 210.00
	City Vernon Rockville State CT Zip Code 06066	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Postage Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
USPS - Vernon

Mailing Address 141 Union Street

City State Zip Code
Vernon Rockville CT 06066

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342907
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

210.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
USPS - Vernon

Mailing Address 141 Union Street

City State Zip Code
Vernon Rockville CT 06066

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342908
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

126.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
USPS - Vernon

Mailing Address 141 Union Street

City State Zip Code
Vernon Rockville CT 06066

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342909
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

84.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

<p>A. Full Name (Last, First, Middle Initial) USPS - Vernon</p> <p>Mailing Address 141 Union Street</p> <p>City Vernon Rockville State CT Zip Code 06066</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342910</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 189.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) USPS - Vernon</p> <p>Mailing Address 141 Union Street</p> <p>City Vernon Rockville State CT Zip Code 06066</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342911</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 252.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) USPS - Vernon</p> <p>Mailing Address 141 Union Street</p> <p>City Vernon Rockville State CT Zip Code 06066</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D342913</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 588.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
USPS - Vernon

Mailing Address 141 Union Street

City State Zip Code
Vernon Rockville CT 06066

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342914
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

168.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
USPS - Vernon

Mailing Address 141 Union Street

City State Zip Code
Vernon Rockville CT 06066

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342916
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

252.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Verizon Wireless

Mailing Address P.O. Box 489

City State Zip Code
Newark NJ 07101

Purpose of Disbursement
Mobile Phone

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D342957
Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

303.50

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) VoicePulse Inc	Transaction ID: D342955 Date of Disbursement 10 / 01 / 2008
	Mailing Address 2227 US Highway One #224	Amount of Each Disbursement this Period 31.78
	City North Brunswick State NJ Zip Code 08902	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Computer Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D335102 Date of Disbursement 10 / 03 / 2008
	Mailing Address 225 Second Avenue	Amount of Each Disbursement this Period 967.49
	City Waltham State MA Zip Code 02454	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Wages Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Erin Clark	Transaction ID: D335118 Date of Disbursement 10 / 03 / 2008
	Mailing Address 122 Chestnut Hill Road	Amount of Each Disbursement this Period 967.49
	City Colchester State CT Zip Code 06415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Wages Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	967.49
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 225 Second Avenue

City Waltham State MA Zip Code 02454

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335103
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

1056.59

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

B.

Full Name (Last, First, Middle Initial)
Matthew S. Gianquinto

Mailing Address 215 Oxford St

City Hartford State CT Zip Code 06105

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335120
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

1056.59

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 225 Second Avenue

City Waltham State MA Zip Code 02454

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335105
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

1281.38

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

SUBTOTAL of Disbursements This Page (optional)

2337.97

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Andrew Bray

Mailing Address 12 Broadway

City Colchester State CT Zip Code 06415

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335121
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

1281.38

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 225 Second Avenue

City Waltham State MA Zip Code 02454

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335108
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

2255.72

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

C.

Full Name (Last, First, Middle Initial)
Ivy Mackin

Mailing Address 1630 R Street NW Apt 209

City Washington State DC Zip Code 20009

Purpose of Disbursement
Wages

Candidate Name

001
Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D335124
Date of Disbursement

10 / 03 / 2008

Amount of Each Disbursement this Period

2255.72

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2255.72

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 Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Courtney for Congress

A.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D335109
	Mailing Address 225 Second Avenue	Date of Disbursement 10 / 03 / 2008
	City Waltham State MA Zip Code 02454	Amount of Each Disbursement this Period 2912.02
	Purpose of Disbursement Wages 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:	001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Mr. Lon J Seidman	Transaction ID: D335125
	Mailing Address 76 Bushy Hill Rd	Date of Disbursement 10 / 03 / 2008
	City Ivoryton State CT Zip Code 06442	Amount of Each Disbursement this Period 2912.02
	Purpose of Disbursement Wages 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:	001 Category/Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

2912.02

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

497130.58