

# 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  
Re-Elect McGovern Committee

ADDRESS (number and street) PO Box 60405  
 Check if different than previously reported. (ACC)  
Worcester MA 01606

2. **FEC IDENTIFICATION NUMBER** C00285171  
**CITY** STATE ZIP CODE STATE DISTRICT  
MA 03  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 04 01 2011 through 06 30 2011

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 Mr. William T Talcott,, III

Signature of Treasurer Electronically Filed by Mr. William T Talcott,, III Date 07 15 2011

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Re-Elect McGovern Committee

Report Covering the Period:

From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	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)).....	167012.00	251689.04
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	167012.00	251689.04
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	50616.89	238183.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	200.28	3481.38
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	50416.61	234701.83
8. Cash on Hand at Close of Reporting Period (from Line 27).....	147959.74	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Re-Elect McGovern Committee

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

<b>I. RECEIPTS</b>	<b>COLUMN A</b> Total This Period	<b>COLUMN B</b> Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	77701.00	123271.10
(i) Itemized (use Schedule A).....	19561.00	38567.94
(ii) Unitemized.....	97262.00	161839.04
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	69750.00	89850.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	167012.00	251689.04
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	200.28	3481.38
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.03	0.26
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	167212.31	255170.68

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

4 / 99

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	50616.89	238183.21
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	3125.00	4425.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	53741.89	242608.21

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	34489.32
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	167212.31
25. SUBTOTAL (add Line 23 and Line 24).....	201701.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	53741.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	147959.74

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 108 Lovett Rd

City State Zip Code  
Newton MA 02459

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

Name of Employer Occupation  
Pharmacist Birds Hill Pharmacy

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.10688527

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.10688102.0

Amount of Each Receipt this Period  
1000.00

0.00

**[MEMO ITEM]**  
Total earmarked through conduit; PAC limit not affected.

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

Mailing Address P.O. Box 382110

City State Zip Code  
Cambridge MA 02238

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

Name of Employer Occupation

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.10688573.0

Amount of Each Receipt this Period  
250.00

0.00

**[MEMO ITEM]**  
Total earmarked through conduit; PAC limit not affected.

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 99
	<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)  
Re-Elect McGovern Committee

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

Mailing Address 46 Moulton St

City State Zip Code  
Newton MA 02462

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

Name of Employer Business Manager Occupation Donoghue, Barrett

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 21 / 2011  
Transaction ID: SA11AI.10688506  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 150-11 - 72 Road

City State Zip Code  
Kew Garden Hills NY 11367

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

Name of Employer Triangle General Contractors Occupation CEO

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 20 / 2011  
Transaction ID: SA11AI.10688516  
Amount of Each Receipt this Period: 1000.00

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

Mailing Address 15020- 71st Avenue

City State Zip Code  
Flushing NY 11367

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

Name of Employer Triangle GC Occupation VP

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 20 / 2011  
Transaction ID: SA11AI.10688521  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

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

FOR LINE NUMBER: PAGE 7 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 311 Main Street

City Worcester State MA Zip Code 01608

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

Name of Employer Bowditch & Dewey Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
05 / 04 / 2011

Transaction ID: SA11AI.10688222

Amount of Each Receipt this Period: 500.00

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

Mailing Address 1310 Nineteenth St., NW

City Washington State DC Zip Code 20036

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

Name of Employer O'Neill, Athy & Casey Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
05 / 13 / 2011

Transaction ID: SA11AI.10688155

Amount of Each Receipt this Period: 500.00

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

Mailing Address 617 E 188th Street

City Brooklyn State NY Zip Code 10458

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

Name of Employer Bajraktari Properties Occupation Owner

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: MM / DD / YYYY  
06 / 20 / 2011

Transaction ID: SA11AI.10688511

Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2000.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 11 Popple Grove Rd

City State Zip Code  
Harwich MA 02645

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation  
human resources consultant

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
05 / 11 / 2011

**Transaction ID:** SA11AI.10688105

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1 Beacon St

City State Zip Code  
Boston MA 02108

FEC ID number of contributing federal political committee. C

Name of Employer Donahue Barrett & Singal Occupation  
Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688503

Amount of Each Receipt this Period  
500.00

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

Mailing Address 81adams St

City State Zip Code  
Boylston MA 01505

FEC ID number of contributing federal political committee. C

Name of Employer Loanmax.Com Occupation  
Ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt M M / D D / Y Y Y Y  
05 / 18 / 2011

**Transaction ID:** SA11AI.10688307

Amount of Each Receipt this Period  
201.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1201.00

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 337 Robin Hill St

City State Zip Code  
Marlborough MA 01752

FEC ID number of contributing federal political committee. C

Name of Employer Hillside School      Occupation Coach

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 17 / 2011  
**Transaction ID:** SA11AI.10688301  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 39 Parkhurst Dr

City State Zip Code  
Ashland MA 01721

FEC ID number of contributing federal political committee. C

Name of Employer Northeast Pharmacy Service Corporation      Occupation VP

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688536  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 78 S Quinsigamond Ave

City State Zip Code  
Shrewsbury MA 01545

FEC ID number of contributing federal political committee. C

Name of Employer Mintz Levin      Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 02 / 2011  
**Transaction ID:** SA11AI.10688184  
 Amount of Each Receipt this Period 500.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 99

(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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
ROBERT K BLAISDELL

Mailing Address 30 Oakland St

City State Zip Code  
Salem MA 01970

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

Name of Employer Occupation  
Donahue, Barrett & Singall Attorney

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.10688502

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)  
PHILIP G BOYLE

Mailing Address 200 State Street

City State Zip Code  
Boston MA 02109

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

Name of Employer Occupation  
MORGAN, BROWN & JOY, LLP Attorney

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.10688504

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
JOHN P BRISSETTE

Mailing Address 55 Amherst St

City State Zip Code  
Worcester MA 01602

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

Name of Employer Occupation  
Braley & Wellington Ins. Sales

Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.10688311

Amount of Each Receipt this Period

250.00

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

1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 48 Moreland Ter

City State Zip Code  
New Bedford MA 02740

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

Name of Employer Occupation  
PharmaHealth Pharmacies Compounding Specialist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688548

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4903 Rock Spring Rd

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Glover Park Group Partner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 13 / 2011

**Transaction ID:** SA11AI.10688147

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 20 Paul David Way

City State Zip Code  
Stoughton MA 02072

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

Name of Employer Occupation  
MA Independent Pharmacists Assn. Executive Director

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688528

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 12 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 15 Mattapoiset Ave

City State Zip Code  
Swansea MA 02777

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

Name of Employer Occupation  
Insurit Agency Inc. Ins Agt

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688522

Amount of Each Receipt this Period  
250.00

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

Mailing Address One Almondwood Circle

City State Zip Code  
Shrewsbury MA 01545

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

Name of Employer Occupation  
The Wellness Corp Business Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 28 / 2011

**Transaction ID:** SA11AI.10688101

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 11 Hancock Hill Dr

City State Zip Code  
Worcester MA 01609

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

Name of Employer Occupation  
Small Business Service Bureau Chairman & Ceo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 22 / 2011

**Transaction ID:** SA11AI.10688412

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 460 Salisbury St

City Worcester State MA Zip Code 01609

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

Name of Employer Sbsb Occupation Executive

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 05 / 19 / 2011  
**Transaction ID:** SA11AI.10688334  
 Amount of Each Receipt this Period: 250.00

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

Mailing Address 111 Purchase St

City Milford State MA Zip Code 01757

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 05 / 20 / 2011  
**Transaction ID:** SA11AI.10688370  
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address 146 Desimone Dr

City Marlborough State MA Zip Code 01752

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

Name of Employer PROVIDENCE AND WORCESTER RAILROAD Occupation PRESIDENT

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 05 / 18 / 2011  
**Transaction ID:** SA11AI.10688126  
 Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 14 / 99</span> (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)  
Re-Elect McGovern Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) THOMAS F CORY, III</p> <p>Mailing Address 389 Stafford Rd</p> <p>City State Zip Code Fall River MA 02721</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Standard Pharmacy      Occupation Pharmacist</p> <p>Receipt For: 2012  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 10 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.10688526</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
---	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) THOMAS P CROTTY</p> <p>Mailing Address 7 Fort St</p> <p>City State Zip Code Fairhaven MA 02719</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Self      Occupation Attorney</p> <p>Receipt For: 2012  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">06 / 12 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.10688481</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
--	--

<p><b>C.</b> Full Name (Last, First, Middle Initial) CHRISTOPHER CROWLEY</p> <p>Mailing Address 116 Main St</p> <p>City State Zip Code Southborough MA 01772</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Polar Beverages      Occupation Executive Vp, Treasurer</p> <p>Receipt For: 2012  <input checked="" type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">05 / 17 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.10688282</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>SUBTOTAL</b> of Receipts This Page (optional) .....</p>	<p><span style="border: 1px solid black; padding: 2px;">1250.00</span></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><span style="border: 1px solid black; padding: 2px;"> </span></p>

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

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

FOR LINE NUMBER: PAGE 15 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 499 Mountain Road

City State Zip Code  
Princeton MA 01541

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

Name of Employer Occupation  
Wachusett Mtn. Assoc. Ski Operator

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2011

**Transaction ID:** SA11AI.10688310

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6 Dawley Rd

City State Zip Code  
Westminster MA 01473

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

Name of Employer Occupation  
Wachusett Mountain President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 18 / 2011

**Transaction ID:** SA11AI.10688305

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
RALPH D CROWLEY, JR

Mailing Address 11 Massachusetts Ave

City State Zip Code  
Worcester MA 01609

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

Name of Employer Occupation  
Polar Beverages, Inc President/Geo

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2011

**Transaction ID:** SA11AI.10688283

Amount of Each Receipt this Period  
500.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 2400 Beacon St

City State Zip Code  
Chestnut Hill MA 02467

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

Name of Employer LTC Group Occupation VP

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 04 / 20 / 2011  
**Transaction ID:** SA11AI.10688102  
 Amount of Each Receipt this Period: 1000.00  
 earmarked through ActBlue

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

Mailing Address 2400 Beacon St

City State Zip Code  
Chestnut Hill MA 02467

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

Name of Employer LTC Group Occupation VP

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688538  
 Amount of Each Receipt this Period: 1500.00

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

Mailing Address 2400 Beacon St

City State Zip Code  
Chestnut Hill MA 02467

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

Name of Employer LTC Group Occupation VP

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688539  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 21 Chequessett Rd

City State Zip Code  
Reading MA 01867

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

Name of Employer Occupation  
Homemaker

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688544

Amount of Each Receipt this Period  
500.00

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

Mailing Address 94 Beeching St

City State Zip Code  
Worcester MA 01602

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

Name of Employer Occupation  
D.L. Rider CO., Inc. President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688466

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 300 Boylston St

City State Zip Code  
Boston MA 02116

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

Name of Employer Occupation  
ACI Executive

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688505

Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

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

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

FOR LINE NUMBER: PAGE 18 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 358 Salisbury St

City Worcester State MA Zip Code 01609

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 17 / 2011  
**Transaction ID:** SA11AI.10688291  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 64 Nevin Rd

City Weymouth State MA Zip Code 02190

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

Name of Employer Amro Environmental Occupation Env Mgr

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 21 / 2011  
**Transaction ID:** SA11AI.10688500  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 50 Autumn Rd

City Weston State MA Zip Code 02493

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

Name of Employer Pharmacist Occupation Keyes Drug Inc.

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688525  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
JOHN K DIRENZO, SR  
Mailing Address 3 Harris Grv  
City Millbury State MA Zip Code 01527  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Drenzo Towing & Recovery Occupation Owner  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 05 / 18 / 2011  
Transaction ID: SA11AI.10688309  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
MAUREEN A DONOGHUE  
Mailing Address 54 Summerhill Ave  
City Worcester State MA Zip Code 01606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 05 / 19 / 2011  
Transaction ID: SA11AI.10688349  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL J DONOGHUE  
Mailing Address 54 Summerhill Ave  
City Worcester State MA Zip Code 01606  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Retired Occupation Retired  
Receipt For: 2012 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 05 / 19 / 2011  
Transaction ID: SA11AI.10688350  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**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 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
ROGER D DONOGHUE  
Mailing Address 27 Jackson Dr  
City Acton State MA Zip Code 01720  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Donoghue Barrett & Singal Occupation Partner  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 06 / 27 / 2011  
Transaction ID: SA11AI.10688488  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
FREDERICK H EPPINGER, JR  
Mailing Address 44 South Street  
City Grafton State MA Zip Code 01519  
FEC ID number of contributing federal political committee. **C**  
Name of Employer The Hanover Insurance Group Occupation President & Ceo  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00  
Date of Receipt 05 / 22 / 2011  
Transaction ID: SA11AI.10688409  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
PATRICIA A FAHY  
Mailing Address 770 E 6th St  
City Boston State MA Zip Code 02127  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Malcolm Pirnie Inc Occupation Consultant  
Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt 06 / 21 / 2011  
Transaction ID: SA11AI.10688509  
Amount of Each Receipt this Period 250.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 18 Winfield Street

City State Zip Code  
East Freetown MA 02717

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

Name of Employer Occupation  
PharmaHealth Pharmacy CEO

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688531

Amount of Each Receipt this Period  
250.00

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

Mailing Address 75 G.a.R. Highway

City State Zip Code  
Swansea MA 02777

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

Name of Employer Occupation  
Self- Venus De Milo Restau- rant Owner/President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688549

Amount of Each Receipt this Period  
500.00

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

Mailing Address 180 Wren Street

City State Zip Code  
West Roxbury MA 02132

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

Name of Employer Occupation  
Homemaker

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688496

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

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

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

FOR LINE NUMBER: PAGE 22 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 316 Pennsylvania Ave, SE

City Washington State DC Zip Code 20003

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

Name of Employer O'Neil and Associates Occupation GOVERNMENT RELATIONS

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 12 / 2011  
**Transaction ID:** SA11AI.10688109  
Amount of Each Receipt this Period 500.00

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

Mailing Address 86 Dresser Hill Rd

City Charlton State MA Zip Code 01507

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

Name of Employer Retired Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt 05 / 22 / 2011  
**Transaction ID:** SA11AI.10688401  
Amount of Each Receipt this Period 100.00

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

Mailing Address P.O. Box 1551

City Northampton State MA Zip Code 01061

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688534  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 99  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 1325 19th Road, South

City Arlington State VA Zip Code 22202

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

Name of Employer Democratic National Com. Occupation Dep. Political Dir.

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 13 / 2011  
Transaction ID: SA11AI.10688146  
Amount of Each Receipt this Period: 250.00

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

Mailing Address 138 71st Street

City Brooklyn State NY Zip Code 11209

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

Name of Employer Triangle Gen. Cont. Occupation Prospect Mgr.

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 20 / 2011  
Transaction ID: SA11AI.10688519  
Amount of Each Receipt this Period: 2500.00

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

Mailing Address 138 71st Street

City Brooklyn State NY Zip Code 11209

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

Name of Employer Triangle Gen. Cont. Occupation Prospect Mgr.

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 20 / 2011  
Transaction ID: SA11AI.10688520  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address P.O.Box 355

City State Zip Code  
Rutland MA 01543

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

Name of Employer Occupation  
C&S BUILDERS, INC Homebuilder

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2011

**Transaction ID:** SA11AI.10688419

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date Amount: 250.00

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

Mailing Address 539 Bolin Terr

City State Zip Code  
Upper Marlboro MD 20774

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

Name of Employer Occupation  
Dc Housing Enterprises Business Manager

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2011

**Transaction ID:** SA11AI.10688157

Amount of Each Receipt this Period  
200.00

Election Cycle-to-Date Amount: 300.00

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

Mailing Address 34 Brimstone Ln

City State Zip Code  
Sudbury MA 01776

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

Name of Employer Occupation  
Merchant Processing Integrity Merchant owner/partner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2011

**Transaction ID:** SA11AI.10688386

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date Amount: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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



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

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

FOR LINE NUMBER: PAGE 25 / 99

(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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD SCOTT GRINLEY  
Mailing Address 25 Plympton St

City State Zip Code  
Waltham MA 02451

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

Name of Employer Occupation  
Mobil Medical President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2011

Transaction ID: SA11AI.10688546

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
ABRAHAM W HADDAD  
Mailing Address 25 Westwood Dr

City State Zip Code  
Worcester MA 01609

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 04 / 2011

Transaction ID: SA11AI.10688227

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
ABRAHAM W HADDAD  
Mailing Address 25 Westwood Dr

City State Zip Code  
Worcester MA 01609

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

Name of Employer Occupation  
Self Dentist

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 17 / 2011

Transaction ID: SA11AI.10688295

Amount of Each Receipt this Period  
500.00

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

1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 784 Main Road

City State Zip Code  
Westport MA 02790

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

Name of Employer Occupation  
Westport Apothecary President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688529

Amount of Each Receipt this Period  
250.00

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

Mailing Address 8 Electric Ave

City State Zip Code  
Leominster MA 01453

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

Name of Employer Occupation  
Central Mass. Auto Auction Controller

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
05 / 21 / 2011

**Transaction ID:** SA11AI.10688392

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 4 Arrowhead Ave

City State Zip Code  
Auburn MA 01501

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

Name of Employer Occupation  
MA Manufacturing Partners-hip President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
05 / 20 / 2011

**Transaction ID:** SA11AI.10688368

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 847 Washington Street

City Holliston State MA Zip Code 01746

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 05 / 25 / 2011  
**Transaction ID:** SA11AI.10688455  
 Amount of Each Receipt this Period: 250.00

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

Mailing Address 1525 West 11 Street

City Brooklyn State NY Zip Code 11204

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

Name of Employer Triangle GC, Inc Occupation estimator

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 20 / 2011  
**Transaction ID:** SA11AI.10688512  
 Amount of Each Receipt this Period: 1000.00

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

Mailing Address 653 Lowell St

City Lexington State MA Zip Code 02420

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

Name of Employer MA Pharmaceutical Association Occupation Executive Director

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688523  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

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

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

FOR LINE NUMBER: PAGE 28 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 6 Middle St

City State Zip Code  
Dartmouth MA 02748

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

Name of Employer Occupation  
Dartmouth Public Schools Teacher

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688453

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 60 Woodmere Drive

City State Zip Code  
Sudbury MA 01776

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688176

Amount of Each Receipt this Period  
250.00

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

Mailing Address 65 Lake Ave

City State Zip Code  
Worcester MA 01604

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

Name of Employer Occupation  
Wings Restaurateur

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688441

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 983 Pleasant St

City Worcester State MA Zip Code 01602

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

Name of Employer Kei Occupation Business

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt 05 / 21 / 2011  
**Transaction ID:** SA11AI.10688394  
 Amount of Each Receipt this Period 100.00

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

Mailing Address 1420 N Street

City Washington State DC Zip Code 20005

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

Name of Employer DAI Occupation Senior Director, Strategic Marketing

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2011  
**Transaction ID:** SA11AI.10688159  
 Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
HUGH J KILEY, JR.

Mailing Address 4012 Lambs Creek CT.

City Virginia Beach State VA Zip Code 23455

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

Name of Employer Norfolk Southern Corp. Occupation AVP OP

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 06 / 21 / 2011  
**Transaction ID:** SA11AI.10688499  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 99

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
JOHN J KILLEEN

Mailing Address 10512 Bridel Lane

City State Zip Code  
Potomac MD 20854

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

Name of Employer S.a.I.C. Occupation Leg. Director

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.10688160

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
ARNOLD KOHEN

Mailing Address 7324 Baltimore Avenue

City State Zip Code  
Takoma Park MD 20912

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

Name of Employer Self Occupation Writer-Researcher

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.10688573

Amount of Each Receipt this Period  
250.00

earmarked through ActBlue

**C.**

Full Name (Last, First, Middle Initial)  
BARBARA C KOHIN

Mailing Address 11 Berwick St

City State Zip Code  
Worcester MA 01602

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

Name of Employer Retired Occupation Retired

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.10688251

Amount of Each Receipt this Period  
250.00

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

1000.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 1831 83rd Street

City State Zip Code  
Brooklyn NY 11214

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

Name of Employer Triangle GC, Inc      Occupation Project Manager

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688513

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 334 Salem End Road

City State Zip Code  
Framingham MA 01702

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

Name of Employer Cosmo Land Inc.      Occupation President

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688316

Amount of Each Receipt this Period  
500.00

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

Mailing Address 334 Salem End Road

City State Zip Code  
Framingham MA 01702

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

Name of Employer Cosmo Land Inc.      Occupation Office Mgr

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11AI.10688315

Amount of Each Receipt this Period  
500.00

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

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

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

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

FOR LINE NUMBER: PAGE 32 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
PETER J LARKIN  
Mailing Address 496 Cross St  
City State Zip Code  
Boylston MA 01505  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Liberty Square Group Sr. Vp Gov'T Relations  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1  
Transaction ID: SA11AI.10688303  
Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
ANDREW S LEVINE  
Mailing Address 9 Thurston Rd  
City State Zip Code  
Melrose MA 02176  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Donoghue, Barrett & Singal Attorney  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1  
Transaction ID: SA11AI.10688491  
Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
NANCY E LORDAN  
Mailing Address 26 Fairchild Dr  
City State Zip Code  
Reading MA 01867  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Millbrook Nursing & Rehab Ctr Administrator  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2000.00  
Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 1 1  
Transaction ID: SA11AI.10688540  
Amount of Each Receipt this Period  
2000.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 6 Draper St

City State Zip Code  
Natick MA 01760

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 10 / 2011

**Transaction ID:** SA11AI.10688196

Amount of Each Receipt this Period  
250.00

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

Mailing Address 220 Church St

City State Zip Code  
Northborough MA 01532

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

Name of Employer Coghlin Electrical Contractors Occupation Op Mgr

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 20 / 2011

**Transaction ID:** SA11AI.10688130

Amount of Each Receipt this Period  
250.00

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

Mailing Address 63 John Alden Rd

City State Zip Code  
Holden MA 01520

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

Name of Employer Masterman'S Occupation Business Manager

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2011

**Transaction ID:** SA11AI.10688124

Amount of Each Receipt this Period  
500.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 11705 Becket Street

City State Zip Code  
Potomac MD 20854

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

Name of Employer Georgetown University Occupation Career Services Adm.

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11AI.10688154

Amount of Each Receipt this Period  
500.00

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

Mailing Address 325 L Street, NE

City State Zip Code  
Washington DC 20002

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

Name of Employer LIBERTY SQUARE GROUP Occupation GOVT RELATIONS PROFESSIONA

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11AI.10688162

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1441 N. Inglewood St

City State Zip Code  
Arlington VA 22205

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

Name of Employer COVINGTON & BURLING Occupation ATTORNEY

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.10688423

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 22 Shell Road

City Warren State RI Zip Code 02885

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

Name of Employer Lecomte's Dairy Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 12 / 2011  
**Transaction ID:** SA11AI.10688480  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 489 Bay Rd

City S Hamilton State MA Zip Code 01982

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

Name of Employer Foley Hoag Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 21 / 2011  
**Transaction ID:** SA11AI.10688510  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 82 Lowder St

City Dedham State MA Zip Code 02026

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

Name of Employer Self Occupation Lawyer

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 27 / 2011  
**Transaction ID:** SA11AI.10688487  
 Amount of Each Receipt this Period 250.00

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

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

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

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

FOR LINE NUMBER: PAGE 36 / 99

(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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
BRIAN D MCSHANE

Mailing Address 65 Yankee Peddler Dr

City State Zip Code  
Somerset MA 02726

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

Name of Employer Occupation  
Health Care Pharmacy Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11AI.10688537

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
KEVIN L MERCADANTE

Mailing Address 7 Digregorio Dr

City State Zip Code  
Worcester MA 01604

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

Name of Employer Occupation  
Mercadante Funeral Home President

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00

Date of Receipt

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

Transaction ID: SA11AI.10688272

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
SYDNEY L MILLER

Mailing Address 19 Hamden St, PO Box

City State Zip Code  
Boston MA 02119

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

Name of Employer Occupation  
HARRY MILLER COMPANY CEO/CHAIRMAN OF THE BOARD

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11AI.10688381

Amount of Each Receipt this Period  
500.00

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

2750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 37 / 99  
(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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
FREDERICK M MISILO, JR

Mailing Address 125 Brattle St

City State Zip Code  
Holden MA 01520

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

Name of Employer Occupation  
Fletcher, Tilton & Whipple Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.10688416

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL H MULHERN

Mailing Address P.O. Box 962276

City State Zip Code  
Boston MA 02196

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

Name of Employer Occupation  
MBTA Retirement Fund Director

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

**Transaction ID:** SA11AI.10688490

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
DANIEL MUROFF

Mailing Address 328 Wadsworth Avenue

City State Zip Code  
Philadelphia PA 19119

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

Name of Employer Occupation  
Self Government Relations Consultant

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.10688107

Amount of Each Receipt this Period  
250.00

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

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

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

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

FOR LINE NUMBER: PAGE 38 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
SOKOL NECAJ  
Mailing Address 408 Knickerbocker Road  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Triangler General Contractor Occupation Controller  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2500.00  
Date of Receipt 06 / 20 / 2011  
Transaction ID: SA11AI.10688514  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
SOKOL NECAJ  
Mailing Address 408 Knickerbocker Road  
City Englewood State NJ Zip Code 07631  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Triangler General Contractor Occupation Controller  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 3000.00  
Date of Receipt 06 / 20 / 2011  
Transaction ID: SA11AI.10688515  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
SYLEJMAN NIVOKAZI  
Mailing Address 325 West 45th Street  
City New York State NY Zip Code 10036  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Information Requested  
Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 2500.00  
Date of Receipt 06 / 20 / 2011  
Transaction ID: SA11AI.10688517  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 39 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 325 West 45th Street

City State Zip Code  
New York NY 10036

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

Name of Employer Occupation  
Information Requested

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2011

**Transaction ID:** SA11AI.10688518

Amount of Each Receipt this Period  
500.00

3000.00

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

Mailing Address 83 Plain Rd

City State Zip Code  
Westford MA 01886

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

Name of Employer Occupation  
MALCOLM PIRNIE ASSOCIATE

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 27 / 2011

**Transaction ID:** SA11AI.10688484

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address 16 Harrison Ave

City State Zip Code  
Braintree MA 02184

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

Name of Employer Occupation  
Braintree Schools Teacher

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688493

Amount of Each Receipt this Period  
250.00

250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
PAUL F O'DONNELL, III

Mailing Address 33 Chestnut St

City State Zip Code  
Boston MA 02129

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

Name of Employer Occupation  
Hinckley, Allen and Snyder Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688498

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
JOYCE O'LEARY

Mailing Address 5 Dunedin Rd

City State Zip Code  
Wellesley MA 02481

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

Name of Employer Occupation  
Caritas Home Care Nurse

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 27 / 2011

**Transaction ID:** SA11AI.10688489

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER R O'NEILL

Mailing Address 1310 19th Street N. W.

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
O'Neill, Athy & Casey Attorney

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 13 / 2011

**Transaction ID:** SA11AI.10688148

Amount of Each Receipt this Period  
1000.00

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

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 343 Union St

City Millis State MA Zip Code 02054

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

Name of Employer Richardson & Company, P.C. Occupation Accountant

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688545  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 71 Wyola Dr

City Worcester State MA Zip Code 01603

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

Name of Employer Labor Cost Control Occupation Personnel Consultant

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 375.00

Date of Receipt 05 / 16 / 2011  
**Transaction ID:** SA11AI.10688278  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 21 Custom House Street

City Boston State MA Zip Code 02110

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

Name of Employer Blue Front Telecom Group Occupation Vp Sales

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2011  
**Transaction ID:** SA11AI.10688308  
 Amount of Each Receipt this Period 250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 99  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
DANIEL LANGONE PASSACANTILLI

Mailing Address 21 Custom House Street

City State Zip Code  
Boston MA 02110

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

Name of Employer Blue Front Telecom Group Occupation Vp Sales

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 27 / 2011

**Transaction ID:** SA11AI.10688485

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL PASTERNAK

Mailing Address 202 Rock St

City State Zip Code  
Fall River MA 02720

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

Name of Employer Walsh Pharmacy Occupation Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688532

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS PASTERNAK

Mailing Address 202 Rock Street

City State Zip Code  
Fall River MA 02720

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

Name of Employer Self Occupation Pharmacist

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 10 / 2011

**Transaction ID:** SA11AI.10688530

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2250.00**

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

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

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

FOR LINE NUMBER: PAGE 43 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 8559 Blackfoot CT

City Lorton State VA Zip Code 22079

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

Name of Employer Pavluchuk and Associates Occupation LOBBYIST

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 13 / 2011  
**Transaction ID:** SA11AI.10688111  
Amount of Each Receipt this Period 500.00

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

Mailing Address 72 Columbus Rd

City Boylston State MA Zip Code 01505

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

Name of Employer Massachusetts Veterans In-c. Occupation President & Ceo

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 05 / 20 / 2011  
**Transaction ID:** SA11AI.10688364  
Amount of Each Receipt this Period 600.00

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

Mailing Address PO Box 607

City Pembroke State MA Zip Code 02359

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

Name of Employer Prince Lobel Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 21 / 2011  
**Transaction ID:** SA11AI.10688507  
Amount of Each Receipt this Period 250.00

**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 44 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 298 Boston Turnpike, Suite#6

City State Zip Code  
Shrewsbury MA 01545

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Stanford Technology Partners Inc. Manager

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.10688108

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 675a South St

City State Zip Code  
Shrewsbury MA 01545

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Cryogenic Institute of NE Inc. Business Owner

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 1 1

**Transaction ID:** SA11AI.10688340

Amount of Each Receipt this Period  
250.00

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

Mailing Address 113 Appleton Street

City State Zip Code  
Boston MA 02116

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Geriatric Medical Officer

Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.10688541

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... 1500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 524 East 6th St

City State Zip Code  
South Boston MA 02127

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

Name of Employer Donoghue Barrett & Singal Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

**Transaction ID:** SA11AI.10688497

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 316 Main Street

City State Zip Code  
Worcester MA 01608

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

Name of Employer Self Occupation Attorney

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

**Transaction ID:** SA11AI.10688378

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
RONALD L SALOIS, JR

Mailing Address 31 Sibley Rd

City State Zip Code  
Sutton MA 01590

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

Name of Employer Atlas Distributing, Inc. Occupation Executive

Receipt For: 2012  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11AI.10688396

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2750.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
WILLIAM H SHAEVEL

Mailing Address 241 Perkins Street

City State Zip Code  
Jamaica Plain MA 02130

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

Name of Employer Shaevel & Kremis      Occupation Attorney

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

**Transaction ID:** SA11AI.10688483

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
BRUCE SINGAL

Mailing Address 1 Beacon St S

City State Zip Code  
Boston MA 02108

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

Name of Employer Self employed      Occupation Attorney

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

**Transaction ID:** SA11AI.10688486

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
GARY B SKLAR

Mailing Address 2 Standish Rd

City State Zip Code  
Needham MA 02492

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

Name of Employer Geriatric Medical      Occupation VP Sales

Receipt For: 2012      Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

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

**Transaction ID:** SA11AI.10688535

Amount of Each Receipt this Period  
250.00

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 99  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 30 Summer Street

City Lunenburg State MA Zip Code 01462

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

Name of Employer Central Mass Auto Auction Occupation Owner

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 05 / 21 / 2011  
**Transaction ID:** SA11AI.10688393  
Amount of Each Receipt this Period 500.00

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

Mailing Address 50 Congress St

City Boston State MA Zip Code 02109

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

Name of Employer Smith Segal & Sowalsky Occupation Atty

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 06 / 21 / 2011  
**Transaction ID:** SA11AI.10688494  
Amount of Each Receipt this Period 500.00

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

Mailing Address 42 Windchime Dr

City Mansfield State MA Zip Code 02048

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

Name of Employer Occupation Homemaker

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 06 / 10 / 2011  
**Transaction ID:** SA11AI.10688543  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 5105 Nahant St

City State Zip Code  
Bethesda MD 20816

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

Name of Employer Avenue Solutions Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

**Transaction ID:** SA11AI.10688113

Amount of Each Receipt this Period  
500.00

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

Mailing Address 46 King Fisher Ln

City State Zip Code  
Plymouth MA 02360

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

Name of Employer PRW Associates Occupation Employee Benefits Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11AI.10688547

Amount of Each Receipt this Period  
250.00

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

Mailing Address 331 Mirick Rd

City State Zip Code  
Princeton MA 01541

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

Name of Employer Mount Wachusett Occupation Manager

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11AI.10688306

Amount of Each Receipt this Period  
250.00

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

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



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

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

FOR LINE NUMBER: PAGE 49 / 99  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
JOHN L SULLIVAN  
 Mailing Address 19 Townsend Dr  
 City State Zip Code  
 West Boylston MA 01583  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Umass - Memorial Healthca- Physician  
 re  
 Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 1 1  
**Transaction ID:** SA11AI.10688300  
 Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
STEPHANIE E SULLIVAN  
 Mailing Address 4 Assabet Dr  
 City State Zip Code  
 Northborough MA 01532  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Avia Consulting Software Cons  
 Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 1 1  
**Transaction ID:** SA11AI.10688422  
 Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
ROCKY J TENAGLIA  
 Mailing Address 60 Prospect Ave  
 City State Zip Code  
 Hull MA 02045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Hingham Centre Pharmacy Pharmacist  
 Receipt For: 2012 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 1 0 / 2 0 1 1  
**Transaction ID:** SA11AI.10688533  
 Amount of Each Receipt this Period  
 250.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

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

Mailing Address 16 Auburn St

City State Zip Code  
Boston MA 02129

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

Name of Employer Cb Richard Ellis Occupation Real Estate Broker

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688495

Amount of Each Receipt this Period  
500.00

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

Mailing Address 135 Parker Rd

City State Zip Code  
Framingham MA 01702

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

Name of Employer Massachusetts Bay Associates, Inc. Occupation Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 21 / 2011

**Transaction ID:** SA11AI.10688501

Amount of Each Receipt this Period  
250.00

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

Mailing Address 127 Jordan Road

City State Zip Code  
Brookline MA 02446

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

Name of Employer Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 03 / 2011

**Transaction ID:** SA11AI.10688204

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 99
	(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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial) WILLIAM M ZALL		Date of Receipt
Mailing Address 23 Surrey Ln		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 10 / 2011
City	State	Zip Code
Natick	MA	01760
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.10688542
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer Cunningham, Machanic, Cet- lin, Johnson.	Occupation Attorney	
Receipt For: 2012	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text"/> 250.00	

**B.**

Full Name (Last, First, Middle Initial) JAMES V ZURAITIS		Date of Receipt
Mailing Address 12 Town Farm Rd		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 22 / 2011
City	State	Zip Code
Sutton	MA	01590
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.10688407
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 250.00
Name of Employer The Hanover Insurance Gro- up	Occupation Insurance	
Receipt For: 2012	Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
<input type="checkbox"/> Other (specify) ▼	<input type="text"/> 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 500.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 77701.00

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

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

FOR LINE NUMBER: PAGE 52 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
American Academy of Audiology, Inc. Pac  
Mailing Address 11730 Plaza America Drive  
City Reston State VA Zip Code 20190  
FEC ID number of contributing federal political committee. **C** C00342972  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00  
Date of Receipt 06 / 11 / 2011  
Transaction ID: SA11C.10688465  
Amount of Each Receipt this Period 2000.00

**B.** Full Name (Last, First, Middle Initial)  
American Association For Justice Pac  
Mailing Address 777 6th Street, NW  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00024521  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 05 / 13 / 2011  
Transaction ID: SA11C.10688429  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
American Federation of Government Employees Pac  
Mailing Address 80 F Street N.W.  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C00009936  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 06 / 20 / 2011  
Transaction ID: SA11C.10688468  
Amount of Each Receipt this Period 1000.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
American Federation of State Cty & Mun Emp Pac  
Mailing Address 1625 L Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C30000798

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 06 / 20 / 2011  
**Transaction ID:** SA11C.10688467  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
American Federation of Teachers Pac  
Mailing Address 555 New Jersey Ave. N. W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00028860

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 25 / 2011  
**Transaction ID:** SA11C.10688456  
 Amount of Each Receipt this Period: 2500.00

**C.** Full Name (Last, First, Middle Initial)  
American Health Care Association Pac  
Mailing Address 1201 L. Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 06 / 12 / 2011  
**Transaction ID:** SA11C.10688479  
 Amount of Each Receipt this Period: 1000.00

**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 54 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Amerigroup Pac  
Mailing Address 4425 Corporation Ln  
City Virginia Beach State VA Zip Code 23462  
FEC ID number of contributing federal political committee. **C** C00428102  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 05 / 30 / 2011  
Transaction ID: SA11C.10688431  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AstraZeneca PAC  
Mailing Address 1800 Concord Pike, PO Box  
City Wilmington State DE Zip Code 19850  
FEC ID number of contributing federal political committee. **C** C00279455  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00  
Date of Receipt 06 / 30 / 2011  
Transaction ID: SA11C.10688571  
Amount of Each Receipt this Period 1500.00

**C.** Full Name (Last, First, Middle Initial)  
Brotherhood of Locomotive Engineers PAC  
Mailing Address 1370 Ontario St  
City Cleveland State OH Zip Code 44113  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 05 / 13 / 2011  
Transaction ID: SA11C.10688151  
Amount of Each Receipt this Period 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 99
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<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)  
Re-Elect McGovern Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Committee To Elect Joseph A. Connolly		Date of Receipt
	Mailing Address 31 Marilyn Road		<input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Weymouth	MA	02190
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10688482
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Committee to Elect Kevin T. Byrne		Date of Receipt
	Mailing Address 38 North Street		<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Shrewsbury	MA	01545
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10688218
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Corning Incorporated Employees PAC		Date of Receipt
	Mailing Address 325 7th Street, NW		<input type="text" value="05"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Washington	DC	20004
	FEC ID number of contributing federal political committee.		Transaction ID: SA11C.10688432
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2012		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1500.00"/>
<b>TOTAL</b> 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 56 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council

Mailing Address 601 Pennsylvania Avenue, NW

City State Zip Code  
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** SA11C.10688426

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 25 Louisiana Avenue, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00285171

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** SA11C.10688475

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 50 F Street, NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00193631

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.10688144

Amount of Each Receipt this Period  
1000.00

**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 57 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Fidelity Corp. Federal Pac

Mailing Address 82 Devonshire Street

City State Zip Code  
Boston MA 02109

FEC ID number of contributing federal political committee. **C** c00380550

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

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

**Transaction ID:** SA11C.10688427

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
Fidelity Corp. Federal Pac

Mailing Address 82 Devonshire Street

City State Zip Code  
Boston MA 02109

FEC ID number of contributing federal political committee. **C** c00380550

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** SA11C.10688428

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
General Mills Inc PAC

Mailing Address #1 General Mills Blvd

City State Zip Code  
Minneapolis MN 55426

FEC ID number of contributing federal political committee. **C** C00062646

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 1 1

**Transaction ID:** SA11C.10688572

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Gentiva Health Services Inc. PAC

Mailing Address 12900 Foster St

City State Zip Code  
Overland Park KS 66213

FEC ID number of contributing federal political committee. **C** C00407080

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.10688153

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Homecare and Hospice PAC

Mailing Address 4130 Whitney Avenue

City State Zip Code  
Hamden CT 06518

FEC ID number of contributing federal political committee. **C** C00431981

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.10688138

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Independent Community Bankers Pac

Mailing Address 1615 L Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** c00032698

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

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

**Transaction ID:** SA11C.10688150

Amount of Each Receipt this Period  
 1000.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 99
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Kidspac Inc.  
Mailing Address 2 Brighton Street  
City Belmont State MA Zip Code 02478  
FEC ID number of contributing federal political committee. **C** C00147975  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 2500.00  
Date of Receipt 05 / 13 / 2011  
Transaction ID: SA11C.10688163  
Amount of Each Receipt this Period 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Machinists Non Partisan Political League  
Mailing Address 9000 Machinists Place  
City Upper Marlboro State MD Zip Code 20772  
FEC ID number of contributing federal political committee. **C** C00002469  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 5000.00  
Date of Receipt 06 / 28 / 2011  
Transaction ID: SA11C.10688460  
Amount of Each Receipt this Period 5000.00

**C.** Full Name (Last, First, Middle Initial)  
National Association of Letter Carriers Pac  
Mailing Address 100 Indiana Avenue, NW Suite  
City Washington State DC Zip Code 20001  
FEC ID number of contributing federal political committee. **C** C70001516  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 06 / 28 / 2011  
Transaction ID: SA11C.10688459  
Amount of Each Receipt this Period 1000.00

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

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

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

FOR LINE NUMBER: PAGE 60 / 99

(check only one)

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

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
National Grid Usa Pac  
Mailing Address 40 Sylvan Road

City State Zip Code  
Waltham MA 02451

FEC ID number of contributing federal political committee. **C** C00048702

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2011

Transaction ID: SA11C.10688469

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
National Treasury Employees Union Pac  
Mailing Address 1750 H Street NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 20 / 2011

Transaction ID: SA11C.10688470

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Raytheon Company Pac  
Mailing Address 1100 Wilson Boulevard

City State Zip Code  
Arlington VA 22209

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y  
05 / 13 / 2011

Transaction ID: SA11C.10688143

Amount of Each Receipt this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER: PAGE 61 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Realtors Pac  
Mailing Address 430 N. Michigan Avenue  
City Chicago State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 04 / 20 / 2011  
Transaction ID: SA11C.10688119  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Shaw Group/Stone & Webster Pac  
Mailing Address 1725 Duke St  
City Alexandria State VA Zip Code 22314  
FEC ID number of contributing federal political committee. **C** C00104885  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 05 / 13 / 2011  
Transaction ID: SA11C.10688137  
Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Sheet Metal Workers' Int'L Assoc Pac  
Mailing Address 1750 New York Ave. NW  
City Washington State DC Zip Code 20006  
FEC ID number of contributing federal political committee. **C** C00007542  
Name of Employer Occupation  
Receipt For: 2012  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00  
Date of Receipt: 05 / 02 / 2011  
Transaction ID: SA11C.10688185  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 62 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Steris Corp Good Government Fund  
Mailing Address 5960 Heisley Rd

City State Zip Code  
Mentor OH 44060

FEC ID number of contributing federal political committee. **C** C00368720

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 3 / 2 0 1 1  
**Transaction ID:** SA11C.10688142  
 Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
The Nea Fund For Children and Public Education Pac  
Mailing Address 1201 16th Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00003251

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 2 2 / 2 0 1 1  
**Transaction ID:** SA11C.10688400  
 Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
United Association Political Education Committee  
Mailing Address 3 Park Place

City State Zip Code  
Annapolis MA 21401

FEC ID number of contributing federal political committee. **C** C00012476

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 6 / 2 0 1 1  
**Transaction ID:** SA11C.10688258  
 Amount of Each Receipt this Period  
 5000.00

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

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

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

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

FOR LINE NUMBER: PAGE 63 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
United Food & Commercial Workers International Union Pac  
 Mailing Address 1775 K Street NW, 7th Floor  
 City Washington State DC Zip Code 20006  
 Date of Receipt 05 / 20 / 2011  
**Transaction ID:** SA11C.10688354  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. **C** C00002766  
 Name of Employer Occupation  
 Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 5000.00

**B.** Full Name (Last, First, Middle Initial)  
United Parcel Service Pac  
 Mailing Address 55 Glenlake Pkwy NE  
 City Atlanta State GA Zip Code 30328  
 Date of Receipt 06 / 22 / 2011  
**Transaction ID:** SA11C.10688462  
 Amount of Each Receipt this Period 500.00  
 FEC ID number of contributing federal political committee. **C** c00064766  
 Name of Employer Occupation  
 Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 500.00

**C.** Full Name (Last, First, Middle Initial)  
UNUM Pac  
 Mailing Address 1 Fountain Square  
 City Chattanooga State TN Zip Code 37402  
 Date of Receipt 05 / 16 / 2011  
**Transaction ID:** SA11C.10688271  
 Amount of Each Receipt this Period 2500.00  
 FEC ID number of contributing federal political committee. **C** C00177436  
 Name of Employer Occupation  
 Receipt For: 2012 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Utility Workers Union of America Political Contributions Committee

Mailing Address 815 16th Street NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 05 / 22 / 2011  
**Transaction ID:** SA11C.10688399  
 Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
Van Pool Services, Inc. PAC

Mailing Address 1220 Rankin Drive

City Troy State MI Zip Code 48083

FEC ID number of contributing federal political committee. **C** C00489096

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 05 / 13 / 2011  
**Transaction ID:** SA11C.10688430  
 Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Voter Education Fund Local 170 Drive Fund

Mailing Address P.O.Box 70634

City Worcester State MA Zip Code 01607

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 05 / 12 / 2011  
**Transaction ID:** SA11C.10688134  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**TOTAL** This Period (last page this line number only) ..... ► **69750.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 65 / 99</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input checked="" type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial) Charter Communications		Date of Receipt
Mailing Address 1265 John Q Hammons Drive, Suite 1		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Madison WI 53717		<input type="text"/> 0 4 / <input type="text"/> 1 0 / <input type="text"/> 2 0 1 1
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		<b>Transaction ID:</b> SA14.10688118
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 7.97
Election Cycle-to-Date ▼		refund
<input type="text"/> 7.97		

**B.**

Full Name (Last, First, Middle Initial) Charter Communications		Date of Receipt
Mailing Address 1265 John Q Hammons Drive, Suite 1		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
City State Zip Code Madison WI 53717		<input type="text"/> 0 5 / <input type="text"/> 0 5 / <input type="text"/> 2 0 1 1
FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>		<b>Transaction ID:</b> SA14.10688131
Name of Employer Occupation		Amount of Each Receipt this Period
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text"/> 192.31
Election Cycle-to-Date ▼		refund
<input type="text"/> 200.28		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 200.28
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 200.28

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 66 / 99  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
Fidelity  
Mailing Address PO Box 770001

City State Zip Code  
Cincinnati OH 45277

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

Name of Employer Occupation  
Interest Received

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.24

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 1

**Transaction ID:** SA15.10688568

Amount of Each Receipt this Period  
0.01

Interest received

**B.** Full Name (Last, First, Middle Initial)  
Fidelity  
Mailing Address PO Box 770001

City State Zip Code  
Cincinnati OH 45277

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

Name of Employer Occupation  
Interest Received

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.25

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

**Transaction ID:** SA15.10688569

Amount of Each Receipt this Period  
0.01

Interest received

**C.** Full Name (Last, First, Middle Initial)  
Fidelity  
Mailing Address PO Box 770001

City State Zip Code  
Cincinnati OH 45277

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

Name of Employer Occupation  
Interest Received

Receipt For:  Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 0.26

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

**Transaction ID:** SA15.10688570

Amount of Each Receipt this Period  
0.01

Interest received

**SUBTOTAL** of Receipts This Page (optional) ..... ► **0.03**

**TOTAL** This Period (last page this line number only) ..... ► **0.03**

# 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

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)  
Re-Elect McGovern Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127291</p> <p>Date of Disbursement 04 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127271</p> <p>Date of Disbursement 04 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 0.18</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 17101</p> <p>Purpose of Disbursement Credit card payment; See memo entries</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127250</p> <p>Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 4428.32</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4433.45

**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

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)  
Re-Elect McGovern Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 17101</p> <p>Purpose of Disbursement Credit card payment; See memo entries</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127272</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 3133.43</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 1270</p> <p>City Newark State NJ Zip Code 17101</p> <p>Purpose of Disbursement Credit card payment; See memo entries</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127288</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 1225.18</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address PO Box 53852</p> <p>City Phoenix State AZ Zip Code 85072</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127328</p> <p>Date of Disbursement 06 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 4.95</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

4363.56

**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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) American Express  Mailing Address PO Box 53852  City Phoenix State AZ Zip Code 85072  Purpose of Disbursement Credit card contribution processing fees Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127312 Date of Disbursement 06 / 02 / 2011  Amount of Each Disbursement this Period 29.82
B.	Full Name (Last, First, Middle Initial) American Express  Mailing Address PO Box 1270  City Newark State NJ Zip Code 17101  Purpose of Disbursement Credit card payment; See memo entries Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127311 Date of Disbursement 06 / 29 / 2011  Amount of Each Disbursement this Period 6505.89
C.	Full Name (Last, First, Middle Initial) ARMED FORCES COMMITTEE OF CENTRAL MASS  Mailing Address PO BOX 415  City WORCESTER State MA Zip Code 01613  Purpose of Disbursement Event tickets Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127264 Date of Disbursement 04 / 21 / 2011  Amount of Each Disbursement this Period 400.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

6935.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Re-Elect McGovern Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 808 East Valley Drive</p> <p>City American Fork State UT Zip Code 84003</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127295</p> <p>Date of Disbursement 04 / 04 / 2011</p> <p>Amount of Each Disbursement this Period 29.35</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 808 East Valley Drive</p> <p>City American Fork State UT Zip Code 84003</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127304</p> <p>Date of Disbursement 05 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 31.90</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 808 East Valley Drive</p> <p>City American Fork State UT Zip Code 84003</p> <p>Purpose of Disbursement Credit card contribution processing fees</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127329</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 32.45</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

93.70

**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)  
Re-Elect McGovern Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bullfeathers</p> <p>Mailing Address 410 First St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meal on 2/14/11</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.127335</p> <p>Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 123.29</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 4/7/11 for 4428.32</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bullfeathers</p> <p>Mailing Address 410 First St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meal on 4/8/11</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.127349</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 216.53</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 4/29/11 for 3133.43.</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bullfeathers</p> <p>Mailing Address 410 First St. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meal on 4/20/11</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB17.127355</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 97.02</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 5/25/11 for 1225.18.</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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) <b>BUSINESS CARD SERVICES</b> <hr/> Mailing Address PO BOX 405 <hr/> City BURLINGTON State VT Zip Code 05402 <hr/> Purpose of Disbursement Credit card payment; See memo entries Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127251 Date of Disbursement 04 / 07 / 2011 <hr/> Amount of Each Disbursement this Period 483.75
B.	Full Name (Last, First, Middle Initial) <b>BUSINESS CARD SERVICES</b> <hr/> Mailing Address PO BOX 405 <hr/> City BURLINGTON State VT Zip Code 05402 <hr/> Purpose of Disbursement Credit card payment; See memo entries Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127273 Date of Disbursement 04 / 29 / 2011 <hr/> Amount of Each Disbursement this Period 533.54
C.	Full Name (Last, First, Middle Initial) <b>BUSINESS CARD SERVICES</b> <hr/> Mailing Address PO BOX 405 <hr/> City BURLINGTON State VT Zip Code 05402 <hr/> Purpose of Disbursement Credit card payment; See memo entries Candidate Name <span style="float: right;">Category/ Type</span> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127289 Date of Disbursement 05 / 25 / 2011 <hr/> Amount of Each Disbursement this Period 159.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1176.29

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 73 / 99

<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)  
Re-Elect McGovern Committee

**A.**

Full Name (Last, First, Middle Initial)  
**BUSINESS CARD SERVICES**

**Transaction ID:** SB17.127310  
Date of Disbursement

Mailing Address PO BOX 405

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

City BURLINGTON State VT Zip Code 05402

Amount of Each Disbursement this Period

220.21
--------

Purpose of Disbursement  
Credit card payment; See memo entries

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Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
**Delta Airlines**

**Transaction ID:** SB17.127334  
Date of Disbursement

Mailing Address PO Box 20706

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

City Atlanta State GA Zip Code 30320

Amount of Each Disbursement this Period

667.60
--------

Purpose of Disbursement  
Travel charge on 2/16/11

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**

Associated with American Express payment on 4/7/11 for 4428.32.

**C.**

Full Name (Last, First, Middle Initial)  
**Delta Airlines**

**Transaction ID:** SB17.127363  
Date of Disbursement

Mailing Address PO Box 20706

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

City Atlanta State GA Zip Code 30320

Amount of Each Disbursement this Period

1024.80
---------

Purpose of Disbursement  
Travel charge on 5/17/11

--

Candidate Name

Category/ Type
-------------------

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

220.21
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**TOTAL** This Period (last page this line number only) ..... ►

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) Denterlein  Mailing Address 10 Liberty Square  City Boston State MA Zip Code 02109  Purpose of Disbursement Videographer service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127314 Date of Disbursement 06 / 29 / 2011  Amount of Each Disbursement this Period 2617.37
B.	Full Name (Last, First, Middle Initial) Franks Flowers Shop  Mailing Address 2 Carter Road  City Shrewsbury State MA Zip Code 01545  Purpose of Disbursement Flowers Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127246 Date of Disbursement 04 / 07 / 2011  Amount of Each Disbursement this Period 129.48
C.	Full Name (Last, First, Middle Initial) Franks Flowers Shop  Mailing Address 2 Carter Road  City Shrewsbury State MA Zip Code 01545  Purpose of Disbursement Flowers Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127274 Date of Disbursement 04 / 29 / 2011  Amount of Each Disbursement this Period 118.75

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2865.60

**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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) Franks Flowers Shop	Transaction ID: SB17.127302 Date of Disbursement 06 / 02 / 2011
	Mailing Address 2 Carter Road	Amount of Each Disbursement this Period 426.09
	City Shrewsbury State MA Zip Code 01545	
	Purpose of Disbursement Flowers	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Franks Flowers Shop	Transaction ID: SB17.127318 Date of Disbursement 06 / 29 / 2011
	Mailing Address 2 Carter Road	Amount of Each Disbursement this Period 128.75
	City Shrewsbury State MA Zip Code 01545	
	Purpose of Disbursement Flowers	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Friends of Shrewsbury Senior Center	Transaction ID: SB17.127263 Date of Disbursement 04 / 21 / 2011
	Mailing Address 98 Maple Ave	Amount of Each Disbursement this Period 425.00
	City Shrewsbury State MA Zip Code 01545	
	Purpose of Disbursement Advertisement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ..... ▶

979.84

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)  
Re-Elect McGovern Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Guaranty Management Co <hr/> Mailing Address 370 Main Street <hr/> City Worcester State MA Zip Code 01608 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.127248 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Guaranty Management Co <hr/> Mailing Address 370 Main Street <hr/> City Worcester State MA Zip Code 01608 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.127270 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Guaranty Management Co <hr/> Mailing Address 370 Main Street <hr/> City Worcester State MA Zip Code 01608 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.127292 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 300.00
	Category/ Type
	Category/ Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

900.00

**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)  
Re-Elect McGovern Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Jet Blue</p> <p>Mailing Address PO Box 17435</p> <p>City Salt Lake City State UT Zip Code 84117</p> <p>Purpose of Disbursement Travel charge on 4/6/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127348</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 947.80</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 4/29/11 for 3133.43.</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Legal Sea Food</p> <p>Mailing Address 2020 K Street</p> <p>City Washignton State DC Zip Code 20006</p> <p>Purpose of Disbursement Event catering on 5/12/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127372</p> <p>Date of Disbursement 06 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 823.35</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 6/29/11 for 6505.89.</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MAR-LEN PUBLICATIONS</p> <p>Mailing Address 131 LINCOLN ST.</p> <p>City WORCESTER State MA Zip Code 01605</p> <p>Purpose of Disbursement Advertisement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127258</p> <p>Date of Disbursement 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 150.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

150.00

**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

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)  
Re-Elect McGovern Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Christine Murray</p> <p>Mailing Address 40 Metcalf Street</p> <p>City Worcester State MA Zip Code 01609</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127239</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 113.91</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Christine Murray</p> <p>Mailing Address 40 Metcalf Street</p> <p>City Worcester State MA Zip Code 01609</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127242</p> <p>Date of Disbursement 05 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 56.96</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) National Democratic Club</p> <p>Mailing Address 30 Ivy St.</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Meal on 2/21/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127333</p> <p>Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 283.75</p> <p><b>[MEMO ITEM]</b> Associated with Business Card Services payment on 4/7/11 for 483.75.</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

170.87

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 79 / 99

<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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) National Democratic Club  Mailing Address 30 Ivy St.  City Washington State DC Zip Code 20003 Purpose of Disbursement Event catering charge on 2/25/11 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127338 Date of Disbursement 04 / 07 / 2011  Amount of Each Disbursement this Period 1620.55  <b>[MEMO ITEM]</b> Associated with American Express payment on 4/7/11 for 4428.32.
B.	Full Name (Last, First, Middle Initial) National Democratic Club  Mailing Address 30 Ivy St.  City Washington State DC Zip Code 20003 Purpose of Disbursement Dues/assessment Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127316 Date of Disbursement 06 / 29 / 2011  Amount of Each Disbursement this Period 30.00
C.	Full Name (Last, First, Middle Initial) OConnors Restaurant  Mailing Address 1160 West Boylston Street  City Worcester State MA Zip Code 01606 Purpose of Disbursement Meal on 3/24/11 Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127342 Date of Disbursement 04 / 29 / 2011  Amount of Each Disbursement this Period 36.00  <b>[MEMO ITEM]</b> Associated with Business Card Services payment on 4/29/11 for 533.54.

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

30.00

**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)  
Re-Elect McGovern Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Matthew Pacheco <hr/> Mailing Address 10 Mann Street <hr/> City Medway State MA Zip Code 02053 <hr/> Purpose of Disbursement Fundraiser expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127241 Date of Disbursement 04 / 29 / 2011 <hr/> Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Matthew Pacheco <hr/> Mailing Address 10 Mann Street <hr/> City Medway State MA Zip Code 02053 <hr/> Purpose of Disbursement Fundraiser expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127244 Date of Disbursement 05 / 31 / 2011 <hr/> Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Matthew Pacheco <hr/> Mailing Address 10 Mann Street <hr/> City Medway State MA Zip Code 02053 <hr/> Purpose of Disbursement Fundraiser fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127326 Date of Disbursement 06 / 30 / 2011 <hr/> Amount of Each Disbursement this Period 5000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER: (check only one)

<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)  
Re-Elect McGovern Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address PO Box 4482  City Carol Stream State IL Zip Code 60197  Purpose of Disbursement Payroll service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127249 Date of Disbursement 04 / 07 / 2011  Amount of Each Disbursement this Period 180.21  Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address PO Box 4482  City Carol Stream State IL Zip Code 60197  Purpose of Disbursement Payroll service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127275 Date of Disbursement 05 / 05 / 2011  Amount of Each Disbursement this Period 101.81  Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Paychex  Mailing Address PO Box 4482  City Carol Stream State IL Zip Code 60197  Purpose of Disbursement Payroll service Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127293 Date of Disbursement 06 / 02 / 2011  Amount of Each Disbursement this Period 96.80  Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**378.82**

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) Paychex Inc Mailing Address 27A Midstate Drive City Auburn State MA Zip Code 01501 Purpose of Disbursement State and Federal payroll taxes and withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127268 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 269.87
B.	Full Name (Last, First, Middle Initial) Paychex Inc Mailing Address 27A Midstate Drive City Auburn State MA Zip Code 01501 Purpose of Disbursement State and Federal payroll taxes and withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127296 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 109.90
C.	Full Name (Last, First, Middle Initial) Paychex Inc Mailing Address 27A Midstate Drive City Auburn State MA Zip Code 01501 Purpose of Disbursement State and Federal payroll taxes and withholding Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127303 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 1 1 Amount of Each Disbursement this Period 254.41

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**634.18**

**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)  
Re-Elect McGovern Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Paychex Inc</p> <p>Mailing Address 27A Midstate Drive</p> <p>City Auburn State MA Zip Code 01501</p> <p>Purpose of Disbursement State and federal payroll taxes nd withholding</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127321</p> <p>Date of Disbursement 06 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 238.99</p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Piccolos Restaurant</p> <p>Mailing Address 157 Shrewsbury Street</p> <p>City Worcester State MA Zip Code 01604</p> <p>Purpose of Disbursement Meal on 3/23/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127346</p> <p>Date of Disbursement 04 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 46.00</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 4/29/11 for 3133.43.</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Piccolos Restaurant</p> <p>Mailing Address 157 Shrewsbury Street</p> <p>City Worcester State MA Zip Code 01604</p> <p>Purpose of Disbursement Meal on 5/20/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127365</p> <p>Date of Disbursement 06 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 113.14</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 6/29/11 for 6505.89.</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

238.99

**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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) Powerpay Mailing Address 280 Fore Street City Portland State ME Zip Code 04101 Purpose of Disbursement Credit card contribution processing fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127245 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 1 1 Amount of Each Disbursement this Period 25.93
B.	Full Name (Last, First, Middle Initial) Powerpay Mailing Address 280 Fore Street City Portland State ME Zip Code 04101 Purpose of Disbursement Credit card contribution processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127299 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 1 Amount of Each Disbursement this Period 21.13
C.	Full Name (Last, First, Middle Initial) Powerpay Mailing Address 280 Fore Street City Portland State ME Zip Code 04101 Purpose of Disbursement Credit card contribution processing fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127323 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 1 1 Amount of Each Disbursement this Period 104.54

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	151.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Re-Elect McGovern Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit card contribution processing fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127315 Date of Disbursement 06 / 02 / 2011
	Amount of Each Disbursement this Period 21.98
	Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit card contribution processing fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127324 Date of Disbursement 06 / 03 / 2011
	Amount of Each Disbursement this Period 87.95
	Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Powerpay <hr/> Mailing Address 280 Fore Street <hr/> City Portland State ME Zip Code 04101 <hr/> Purpose of Disbursement Credit card contribution processing fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.127327 Date of Disbursement 06 / 30 / 2011
	Amount of Each Disbursement this Period 9.53
	Category/ Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	119.46
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) <b>QUICK STOP PRINTING</b>	<b>Transaction ID:</b> SB17.127259
	Mailing Address 336R SHREWSBURY ST	Date of Disbursement 04 / 13 / 2011
	City WORCESTER State MA Zip Code 01604	Amount of Each Disbursement this Period 200.49
	Purpose of Disbursement Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) <b>QUICK STOP PRINTING</b>	<b>Transaction ID:</b> SB17.127287
	Mailing Address 336R SHREWSBURY ST	Date of Disbursement 05 / 25 / 2011
	City WORCESTER State MA Zip Code 01604	Amount of Each Disbursement this Period 5912.43
	Purpose of Disbursement Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) <b>QUICK STOP PRINTING</b>	<b>Transaction ID:</b> SB17.127319
	Mailing Address 336R SHREWSBURY ST	Date of Disbursement 06 / 29 / 2011
	City WORCESTER State MA Zip Code 01604	Amount of Each Disbursement this Period 53.13
	Purpose of Disbursement Printing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**6166.05**

**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)  
Re-Elect McGovern Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Scott Ricciuti</p> <p>Mailing Address 202 Reservoir Street</p> <p>City Marlborough State MA Zip Code 01752</p> <p>Purpose of Disbursement Event entertainment</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127282</p> <p>Date of Disbursement 05 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ruth's Chris Steakhouse</p> <p>Mailing Address 45 School Street</p> <p>City Boston State MA Zip Code 02108</p> <p>Purpose of Disbursement Meal on 4/28/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127357</p> <p>Date of Disbursement 05 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 270.78</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 5/25/11 for 1225.18.</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sage System LLC</p> <p>Mailing Address 376 Washington Street</p> <p>City Malden State MA Zip Code 02148</p> <p>Purpose of Disbursement Campaign software charge on 3/1/11</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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.127339</p> <p>Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><b>[MEMO ITEM]</b> Associated with American Express payment on 4/7/11 for 4428.32.</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

250.00

**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)  
Re-Elect McGovern Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Sage System LLC Mailing Address 376 Washington Street City Malden State MA Zip Code 02148 Purpose of Disbursement Campaign software charge on 4/2/11 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127350 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 1000.00 <b>[MEMO ITEM]</b> Associated with American Express payment on 4/29/11 for 3133.43.
<b>B.</b>	Full Name (Last, First, Middle Initial) Sagres Restaurant Mailing Address 181 Columbia Street City Fall River State MA Zip Code 02721 Purpose of Disbursement Event catering on 6/8/11 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127374 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 1270.00 <b>[MEMO ITEM]</b> Associated with American Express payment on 6/29/11 for 6505.89.
<b>C.</b>	Full Name (Last, First, Middle Initial) Scorpios Mailing Address 55 Park Street City Attleboro State MA Zip Code 02703 Purpose of Disbursement Meal on 5/18/11 Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.127364 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 1 1 Amount of Each Disbursement this Period 296.15 <b>[MEMO ITEM]</b> Associated with American Express payment on 6/29/11 for 6505.89.

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Re-Elect McGovern Committee

**A.** Full Name (Last, First, Middle Initial)  
St. Patrick's Parade Committee

Mailing Address PO Box 708

City Worcester State MA Zip Code 01602

Purpose of Disbursement  
Advertisement  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: SB17.127262  
Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

90.00

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

Mailing Address P. O. Box 163

City Millbury State MA Zip Code 01527

Purpose of Disbursement  
Accounting services  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: SB17.127322  
Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

1859.38

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

Mailing Address 33 east Main Street

City Westborough State MA Zip Code 01581

Purpose of Disbursement  
Meal on 3/23/11  
Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼  
State: District:

Transaction ID: SB17.127345  
Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

280.00

**[MEMO ITEM]**

Associated with American Express payment on 4/29/11 for 3133.43.

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1949.38

**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)  
Re-Elect McGovern Committee

A.

Full Name (Last, First, Middle Initial)  
The Boynton Restaurant

Mailing Address 119 Highland St

City Worcester State MA Zip Code 01609

Purpose of Disbursement  
Meal on 4/14/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127353  
Date of Disbursement

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

Amount of Each Disbursement this Period

159.00
--------

**[MEMO ITEM]**

Associated with Business Card Services payment on 5/25/11 for 159.00

B.

Full Name (Last, First, Middle Initial)  
The Citizen

Mailing Address One Exchange Street

City Worcester State MA Zip Code 01608

Purpose of Disbursement  
Meal on 5/27/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127367  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

135.56
--------

**[MEMO ITEM]**

Associated with American Express on 6/29/11 for 65-05.89.

C.

Full Name (Last, First, Middle Initial)  
The Citizen

Mailing Address One Exchange Street

City Worcester State MA Zip Code 01608

Purpose of Disbursement  
Event catering on 5/19/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127369  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

1810.00
---------

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

A.

Full Name (Last, First, Middle Initial)  
The Hartford

Mailing Address Hartford Plaza

City Hartford State CT Zip Code 06115

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127257  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	1

Amount of Each Disbursement this Period

315.00
--------

B.

Full Name (Last, First, Middle Initial)  
T-Mobile.com

Mailing Address PO Box 742596

City Cincinnati State OH Zip Code 45274

Purpose of Disbursement  
Phone expense on 2/9/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127341  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

62.90
-------

**[MEMO ITEM]**

Associated with American Express payment on 4/7/11 for 4428.32.

C.

Full Name (Last, First, Middle Initial)  
Trattoria Alberto

Mailing Address 506 8th Street SW.

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Meal on 4/4/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127347  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Amount of Each Disbursement this Period

334.15
--------

**[MEMO ITEM]**

Associated with American Express payment on 4/29/11 for 3133.43.

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

315.00

**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)  
Re-Elect McGovern Committee

A.	Full Name (Last, First, Middle Initial) Tunncliff's Tavern	Transaction ID: SB17.127331 Date of Disbursement 04 / 29 / 2011
	Mailing Address 222 7th Street SE	Amount of Each Disbursement this Period 124.47
	City Washington DC State DC Zip Code 20003	
	Purpose of Disbursement Meal on 3/16/11	[MEMO ITEM] Associated with Business Card Services payment on 4/29/11 for 533.54.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Tunncliff's Tavern	Transaction ID: SB17.127366 Date of Disbursement 06 / 29 / 2011
	Mailing Address 222 7th Street SE	Amount of Each Disbursement this Period 85.19
	City Washington DC State DC Zip Code 20003	
	Purpose of Disbursement Meal on 5/24/11	[MEMO ITEM] Associated with American Express payment on 6/29/2-011 for 6505.89.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Tunncliff's Tavern	Transaction ID: SB17.127371 Date of Disbursement 06 / 29 / 2011
	Mailing Address 222 7th Street SE	Amount of Each Disbursement this Period 202.09
	City Washington DC State DC Zip Code 20003	
	Purpose of Disbursement Meal on 5/24/11	[MEMO ITEM] Associated with American Express payment on 6/29/11 for 6505.89.
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Re-Elect McGovern Committee

A.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 22 Front Street

City Worcester State MA Zip Code 01614

Purpose of Disbursement  
Postage charge on 3/27/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127343

Date of Disbursement

04 / 29 / 2011

Amount of Each Disbursement this Period

176.00

**[MEMO ITEM]**

Associated with Business Card Services payment on 4/29/11 for 533.54.

B.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 22 Front Street

City Worcester State MA Zip Code 01614

Purpose of Disbursement  
Postage on 4/26/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127361

Date of Disbursement

05 / 25 / 2011

Amount of Each Disbursement this Period

88.00

**[MEMO ITEM]**

Associated with American Express payment on 5/25/11 for 1225.18.

C.

Full Name (Last, First, Middle Initial)  
United States Postal Service

Mailing Address 22 Front Street

City Worcester State MA Zip Code 01614

Purpose of Disbursement  
Postage charge on 5/20/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127376

Date of Disbursement

06 / 29 / 2011

Amount of Each Disbursement this Period

32.35

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

**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)  
Re-Elect McGovern Committee

A.

Full Name (Last, First, Middle Initial)  
US House Members Dining Room

Transaction ID: SB17.127362  
Date of Disbursement

Mailing Address Independence Ave & Capitol St

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

160.00
--------

Purpose of Disbursement  
Meal on 5/27/11

Category/ Type
-------------------

Candidate Name

**[MEMO ITEM]**

Associated with Business Card Services payment on 6/29/11 for 220.21.

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB17.127337  
Date of Disbursement

Mailing Address PO Box 15023

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

City Worcester State MA Zip Code 01615

Amount of Each Disbursement this Period

320.87
--------

Purpose of Disbursement  
Phone expense on 2/10/11

Category/ Type
-------------------

Candidate Name

**[MEMO ITEM]**

Associated with American Express payment on 4/7/11 for 4428.32.

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB17.127340  
Date of Disbursement

Mailing Address PO Box 15023

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

City Worcester State MA Zip Code 01615

Amount of Each Disbursement this Period

323.05
--------

Purpose of Disbursement  
Phone expense on 3/10/11

Category/ Type
-------------------

Candidate Name

**[MEMO ITEM]**

Associated with American Express payment on 4/7/11 for 4428.32.

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

A.

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

Mailing Address PO Box 15023

City Worcester State MA Zip Code 01615

Purpose of Disbursement  
Phone expense on 4/10/11

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127351  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Amount of Each Disbursement this Period

318.68
--------

**[MEMO ITEM]**

Associated with American Express payment on 4/29/11 for 3133.43.

B.

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

Mailing Address PO Box 15023

City Worcester State MA Zip Code 01615

Purpose of Disbursement  
Office equipment charge on 4/21/11

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127359  
Date of Disbursement

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

Amount of Each Disbursement this Period

196.86
--------

**[MEMO ITEM]**

Associated with American Express payment on 5/25/11 for 1225.18.

C.

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

Mailing Address PO Box 15023

City Worcester State MA Zip Code 01615

Purpose of Disbursement  
Phone expense on 5/10/11

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127360  
Date of Disbursement

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

Amount of Each Disbursement this Period

314.17
--------

**[MEMO ITEM]**

Associated with American Express payment on 5/10/11 for 1225.18.

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

A.

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

Mailing Address PO Box 15023

City Worcester State MA Zip Code 01615

Purpose of Disbursement  
Phone expense on 5/19/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127373  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

152.60
--------

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

B.

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

Mailing Address PO Box 15023

City Worcester State MA Zip Code 01615

Purpose of Disbursement  
Phone expense on 6/10/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127375  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

325.09
--------

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

C.

Full Name (Last, First, Middle Initial)  
Viva Bene

Mailing Address 144 Commercial Street

City Worcester State MA Zip Code 01608

Purpose of Disbursement  
Meal on 2/25/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127336  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	1

Amount of Each Disbursement this Period

65.00
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**[MEMO ITEM]**

Associated with American Express payment on 4/7/11 for 4428.32.

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00
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**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

A.

Full Name (Last, First, Middle Initial)  
Viva Bene

Mailing Address 144 Commercial Street

City Worcester State MA Zip Code 01608

Purpose of Disbursement  
Meal on 5/6/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127354  
Date of Disbursement

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

Amount of Each Disbursement this Period

125.15
--------

**[MEMO ITEM]**

Associated with American Express payment on 5/25/11 for 1225.18.

B.

Full Name (Last, First, Middle Initial)  
Viva Bene

Mailing Address 144 Commercial Street

City Worcester State MA Zip Code 01608

Purpose of Disbursement  
Meal on 5/19/11

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127370  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	9		2	0	1	1

Amount of Each Disbursement this Period

34.64
-------

**[MEMO ITEM]**

Associated with American Express payment on 6/29/11 for 6505.89.

C.

Full Name (Last, First, Middle Initial)  
Scott Zoback

Mailing Address 15 Harrison Street, Apt # 3

City Worcester State MA Zip Code 01604

Purpose of Disbursement  
Payroll

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.127240  
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	9		2	0	1	1

Amount of Each Disbursement this Period

896.51
--------

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**896.51**

**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)  
Re-Elect McGovern Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Scott Zoback <hr/> Mailing Address 15 Harrison Street, Apt # 3 <hr/> City Worcester State MA Zip Code 01604 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.127243 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 896.51
<b>B.</b> Full Name (Last, First, Middle Initial) Scott Zoback <hr/> Mailing Address 15 Harrison Street, Apt # 3 <hr/> City Worcester State MA Zip Code 01604 <hr/> Purpose of Disbursement Payroll Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.127325 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 1 1
	Amount of Each Disbursement this Period 896.51

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1793.02

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

50212.24

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Re-Elect McGovern Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Joe Dimagio Little League <hr/> Mailing Address 8 Demarco Terrace <hr/> City Worcester State MA Zip Code 01604 <hr/> Purpose of Disbursement Team sponsor Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21.127260 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 425.00
<b>B.</b>	Full Name (Last, First, Middle Initial) West Side Babe Ruth <hr/> Mailing Address 929 Pleasant St <hr/> City Worcester State MA Zip Code 01602 <hr/> Purpose of Disbursement League sponsor Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21.127284 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 350.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Worcester Academy Golf Tournament <hr/> Mailing Address 81 Providence Street <hr/> City Worcester State MA Zip Code 01604 <hr/> Purpose of Disbursement Golf tournament sponsor Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21.127247 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 250.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1025.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1025.00