

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE

02 JAN 31 AM 10:42

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) New Hampshire Senate 2002	2. FEC IDENTIFICATION NUMBER C00368787
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 430 South Capitol Street, SE	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Washington, DC 20003	

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____ (Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
 in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>9/5/01</u> through <u>12/31/01</u>		
6. (a) Cash on Hand January 1, <u>01</u>		\$ -0-
(b) Cash on Hand at Beginning of Reporting Period	\$ -0-	
(c) Total Receipts (from line 19)	\$ 192802.19	\$ 192802.19
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 192802.19	\$ 192802.19
7. Total Disbursements (from Line 30)	\$ 189212.37	\$ 189212.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 3589.82	\$ 3589.82
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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
 Andrew Grossman

Signature of Treasurer

Date
 1/31/02

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/97)

NAME OF COMMITTEE New Hampshire Senate 2002		REPORT COVERING PERIOD	
		FROM: 9/5/01	TO: 12/31/01
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
I. Itemized (use Schedule A)		168400.00	168400.00
II. Unitemized		850.00	850.00
III. Total (add I and II)		169250.00	169250.00
b. Political Party Committees			
c. Other Political Committees (such as PACs)		15000.00	15000.00
d. Total Contributions (add a III, b and c)		184250.00	184250.00
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)			
18. Transfers from Nonfederal Account for Joint Activity		8552.19	8552.19
19. Total Receipts (add 11d, 12, 13, 14, 16, 17, and 18)		192802.19	192802.19
20. Total Federal Receipts (subtract line 18 from line 19)		184250.00	184250.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share		15606.20	15606.20
II. Non-Federal Share		15606.17	15606.17
b. Other Federal Operating Expenditures			
c. Total Operating Expenditures (Add a I, a II, and b)		31212.37	31212.37
22. Transfers to Affiliated/Other Party Committees		158000.00	158000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made			
27. Loans Made			
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (Add a, b and c)			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)		189212.37	189212.37
31. Total Federal Disbursements (subtract line 21 a II from line 30)		173606.20	173606.20
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)		184250.00	184250.00
33. Total Contribution Refunds (from line 28d)			
34. Net Contributions (other than loans)(subtract line 33 from 32)		184250.00	184250.00
35. Total Federal Operating Expenditures (add 21 a I and 21 b)		15606.20	15606.20
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35)		15606.20	15606.20

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 14
FOR LINE NUMBER 11a1

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)

New Hampshire Senate 2002

FEC ID No. C00368787

<p>A. Full Name, Mailing Address and ZIP Code Herbert Chambers 259 McGrath Highway Somerville, MA 02143</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Herb Chambers Company</p> <p>Occupation President</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Date (month, day, year) 10/17/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Christopher Gabrieli 18 Tremont Street, #1120 Boston, MA 02108</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Massachusetts 2020</p> <p>Occupation Chairman</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Date (month, day, year) 10/24/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Elaine Schuster 132 Yarmouth Road Chestnut Hill, MA 02457</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Continental Wingate</p> <p>Occupation Dr. of Communication</p> <p>Aggregate Year-To-Date \rightarrow \$ 10000.00</p>	<p>Date (month, day, year) 10/26/01</p>	<p>Amount of Each Receipt this Period 10000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code G. Bickley Stevens, II 3 Meadow Way Cambridge, MA 02138</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zero Stage Capital</p> <p>Occupation</p> <p>Aggregate Year-To-Date \rightarrow \$ 2000.00</p>	<p>Date (month, day, year) 10/31/01</p>	<p>Amount of Each Receipt this Period 2000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Theodore Tedeschi 26 Miller Hill Road Dover, MA 02030</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Erickson, Schaffer, Peterson</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Date (month, day, year) 10/31/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Stanley L. Fung 11 Montiero Way North Andover, MA 01845</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zero Stage Capital</p> <p>Occupation</p> <p>Aggregate Year-To-Date \rightarrow \$ 2000.00</p>	<p>Date (month, day, year) 10/31/01</p>	<p>Amount of Each Receipt this Period 2000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Brian M. Johnson 9 Edmund Brigham Way Westborough, MA 01581</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zero Stage Capital</p> <p>Occupation</p> <p>Aggregate Year-To-Date \rightarrow \$ 2000.00</p>	<p>Date (month, day, year) 10/31/01</p>	<p>Amount of Each Receipt this Period 2000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>19000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full) FEC ID No. C00368787
 New Hampshire Senate 2002

A. Full Name, Mailing Address and ZIP Code John Andreoli 674 South Street Shrewsbury, MA 01545 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	1000.00	
B. Full Name, Mailing Address and ZIP Code Peter Lowy 203 Washington Street Westwood, MA 02090 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 250.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	250.00	
C. Full Name, Mailing Address and ZIP Code Alice E. Richmond 39 Brimmer Street Boston, MA 02108 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Richmond Paully & Ault	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	1000.00	
D. Full Name, Mailing Address and ZIP Code Jeri Asher 3 John Benson Road Lexington, MA 02420 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Quality Care	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	1000.00	
E. Full Name, Mailing Address and ZIP Code Robert T. Kenney 120 Fulton Street Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Kenney Development	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	1000.00	
F. Full Name, Mailing Address and ZIP Code Paul Shannon 31 Coachman Lane Methuen, MA 01844 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer St. Joseph's Home	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	500.00	
G. Full Name, Mailing Address and ZIP Code William Mantzoukas 328 Nahant Road Nahant, MA 01908 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date <input type="checkbox"/>	1000.00	

SUBTOTAL of Receipts This Page (optional)	5750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) FEC ID No. C00368787
 New Hampshire Senate 2002

A. Full Name, Mailing Address and ZIP Code James M. Shannon 401 Prospect Street Lawrence, MA 01841	Name of Employer National Fire Protection Assoc.	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Senior VP	Aggregate Year-To-Date \Rightarrow \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code David Mahoney 15 Foster Street Quincy, MA 02169	Name of Employer Law Office of David Mahoney	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 500.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-To-Date \Rightarrow \$ 500.00	
C. Full Name, Mailing Address and ZIP Code Scott Ferson 83 School Street Belmont, MA 02478	Name of Employer McDermott & O'Neill	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Managing Director	Aggregate Year-To-Date \Rightarrow \$ 1000.00	
D. Full Name, Mailing Address and ZIP Code David S. Barlow 44 Hundreds Circle Wellesley, MA 02481	Name of Employer Black Diamond Capital	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 2000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Venture Capital	Aggregate Year-To-Date \Rightarrow \$ 2000.00	
E. Full Name, Mailing Address and ZIP Code John Cullinane 91 Common Street Dedham, MA 02026	Name of Employer Cullinane Group	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman	Aggregate Year-To-Date \Rightarrow \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code Ross Orlander 6 Samba Circle Sandwich, MA 02563	Name of Employer Foster, Miller, Inc	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-To-Date \Rightarrow \$ 1000.00	
G. Full Name, Mailing Address and ZIP Code Alix L.L. Ritchie Box 579 Provincetown, MA 02657	Name of Employer Provincetown Banner	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 10000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Publisher	Aggregate Year-To-Date \Rightarrow \$ 10000.00	

SUBTOTAL of Receipts This Page (optional)	16500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)

New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address and ZIP Code Shanti A. Fry 8 Berkeley Street Cambridge, MA 02138		Name of Employer Bank Boston Securities	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Banker	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
B. Full Name, Mailing Address and ZIP Code Margaret D. Xifaras 34 Piney Point Road Marion, MA 02738		Name of Employer Covy, Xifaras, Bullard	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
C. Full Name, Mailing Address and ZIP Code Anthony Venturoso 18 Forest Park Drive Mendon, MA 01755		Name of Employer MJM Consulting	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
D. Full Name, Mailing Address and ZIP Code John Murphy, Jr. 10 Chestnut Street Peabody, MA 01960		Name of Employer Self-Employed	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Attorney	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
E. Full Name, Mailing Address and ZIP Code Anthony Dorn 60 Burdean Road Newton Centre, MA 02459		Name of Employer Self-Employed	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Importer	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
F. Full Name, Mailing Address and ZIP Code Robert Kargman 246 Dudley Street Brookline, MA 02146		Name of Employer Boston Land Devloper	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Real Estate	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	
G. Full Name, Mailing Address and ZIP Code Martin Kamarck 1230 Park Avenue New York, NY 10128		Name of Employer Enhance Reinsurance	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Businessman	Aggregate Year-To-Date <input type="checkbox"/> 1000.00	

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 New Hampshire Senate 2002

FEC ID No. CD0368787

A. Full Name, Mailing Address and ZIP Code William Thalheimer 50 Heather Drive Rye, NH 03870 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Imagining Automation	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation CEO	Aggregate Year-To-Date \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code Alix Smullin 22 Woodbine Avenue Swampscott, MA 01907 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Harvard University	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 1000.00
	Occupation (blank)	Aggregate Year-To-Date \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code A. Raymond Tye 1 United Drive West Bridgewater, MA 02379 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer United Liquors	Date (month, day, year) 10/31/01	Amount of Each Receipt this Period 10000.00
	Occupation (blank)	Aggregate Year-To-Date \$ 10000.00	
D. Full Name, Mailing Address and ZIP Code Ellen Poss 450 Warren Street Brookline, MA 02146 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed	Date (month, day, year) 11/2/01	Amount of Each Receipt this Period 1000.00
	Occupation Physician	Aggregate Year-To-Date \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code Stever H. Aubrey 35 Westfield Street Dedham, MA 02026 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hill Holiday Advertising	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation (blank)	Aggregate Year-To-Date \$ 500.00	
F. Full Name, Mailing Address and ZIP Code Paul Bakht 16A Carroll Street Exeter, NH 03833 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation (blank)	Aggregate Year-To-Date \$ 500.00	
G. Full Name, Mailing Address and ZIP Code Robert L. Beal 177 Milk Street Boston, MA 02109 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Beal Company	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation President	Aggregate Year-To-Date \$ 500.00	

SUBTOTAL of Receipts This Page (optional)	14500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 6 OF 14

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

New Hampshire Senate 2002

FEC ID No. CD0368787

A. Full Name, Mailing Address and ZIP Code Joe Beck 20 Boothby Road Kennebunk, ME 04043 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 500.00	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Joseph Berkeley 55 Point Allerton Avenue Hull, MA 02045 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 500.00	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Steffan Berelowitz 171 Harvard Street, #4 Brookline, MA 02446 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Bit Group, Inc. Occupation President Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 1000.00	Amount of Each Receipt this Period 1000.00
D. Full Name, Mailing Address and ZIP Code Patrick M. Byrne 700 Bitner Road Park City, UT 84098 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Overstock.com Occupation President Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 8000.00	Amount of Each Receipt this Period 8000.00
E. Full Name, Mailing Address and ZIP Code Sophia Collier 1 Harbour Place, #475 Portsmouth, NH 03801 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Citizens Advisors Occupation Chair Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 5000.00	Amount of Each Receipt this Period 5000.00
F. Full Name, Mailing Address and ZIP Code Marea Donohue 595 Common Street Walpole, MA 02081 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 500.00	Amount of Each Receipt this Period 500.00
G. Full Name, Mailing Address and ZIP Code Ronald Drunker 50 Federal Street, #1000 Boston, MA 02110 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested Occupation Real Estate Aggregate Year-To-Date <input type="checkbox"/>	Date (month, day, year) 11/6/01 1000.00	Amount of Each Receipt this Period 1000.00
SUBTOTAL of Receipts This Page (optional)			16500.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

New Hampshire Senate 2002

FEC ID No. C00368787

<p>A. Full Name, Mailing Address and ZIP Code John Fish 65 Allerton Street Boston, MA 02119</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Suffolk Consulting Company</p> <p>Occupation</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>10000.00</p>	<p>Amount of Each Receipt this Period 10000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Peter Flynn 2 Blacksmith Way Saugus, MA 01906</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code David Gardiner 59 Farrugut Road Swampscott, MA 01907</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hill Holiday Advertising</p> <p>Occupation</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Rita Francis Harris 80 Beacon Street, #12 Boston, MA 02108</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Karen Kaplan 3 Yolande Road Marblehead, MA 01945</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hill Holiday Advertising</p> <p>Occupation</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Stephen R. Karp 1 Wells Avenue Newton Center, MA 02159</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer New England Development</p> <p>Occupation</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code Thomas J. Keady, Jr. 23 Ansonia Road West Roxbury, MA 02132</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Northeastern University</p> <p>Occupation Director Govt Affair</p> <p>Aggregate Year-To-Date <input type="checkbox"/> \$</p>	<p>Date (month, day, year) 11/6/01</p> <p>400.00</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>13900.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full) FEC ID No. C003687B7
 New Hampshire Senate 2002

A. Full Name, Mailing Address and ZIP Code Leslee Kiley 3 Troy Lane Newton, MA 02468 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hill Holiday Advertising	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date \$	500.00	
B. Full Name, Mailing Address and ZIP Code Joanna T. Lau 1235 Monument Street Concord, MA 01742 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer LAJ Technologies	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 1000.00
	Occupation President Aggregate Year-To-Date \$	1000.00	
C. Full Name, Mailing Address and ZIP Code Barbara Lee 131 Mt. Auburn Street, #2 Cambridge, MA 02138 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Philanthropist	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 2000.00
	Occupation Self-Employed Aggregate Year-To-Date \$	2000.00	
D. Full Name, Mailing Address and ZIP Code William Lynn 10 Brookhouse Drive Marblehead, MA 01945 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hill Holiday Advertising	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date \$	500.00	
E. Full Name, Mailing Address and ZIP Code Jonathan Mellin 19 High Ridge Road Topsfield, MA 01983 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hill Holiday Advertising	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date \$	500.00	
F. Full Name, Mailing Address and ZIP Code John Pfazonga 167 Walnut Street Brookline, MA 02146 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date \$	500.00	
G. Full Name, Mailing Address and ZIP Code Todd Riddle 11 Morse Drive Medfield, MA 02052 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hill Holiday Advertising	Date (month, day, year) 11/6/01	Amount of Each Receipt this Period 500.00
	Occupation Aggregate Year-To-Date \$	500.00	

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full) FEC ID No. C00368787
 New Hampshire Senate 2002

<p>A. Full Name, Mailing Address and ZIP Code Carol Riley 483 Jerualism Road Cohasset, MA 02025</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Homemaker</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Laurel Rossi 2 Links Road Gloucester, MA 01930</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Advertising</p> <p>Aggregate Year-To-Date \rightarrow \$ 500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Jeff Setrin 12 Meadowview Lane Merrimack, NH 03054</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Imaging Automation</p> <p>Aggregate Year-To-Date \rightarrow \$ 500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Michael Sheehan 936 East Fourth Street, #3 South Boston, MA 02127</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Advertising</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Inder Soni 9A Canal Street Westport, CT 06880</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Zero Stage Capital</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Mary K. Thompson 10 Gilboa Lane Nashua, NH 03062</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Information Requested</p> <p>Aggregate Year-To-Date \rightarrow \$ 500.00</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>G. Full Name, Mailing Address and ZIP Code John M. Connors 200 Clarendon Street Boston, MA 02116</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Date (month, day, year) 11/6/01</p> <p>Occupation Ad. Executive</p> <p>Aggregate Year-To-Date \rightarrow \$ 1000.00</p>	<p>Amount of Each Receipt this Period 1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>5500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 14
FOR LINE NUMBER 11a1

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)

New Hampshire Senate 2002

FEC ID No. C00368787

<p>A. Full Name, Mailing Address and ZIP Code Charles Campion 284 Dean Road Brookline, MA 02445</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Dewey Square Group</p> <p>Occupation President</p> <p>Aggregate Year-To-Date > 3 1850.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1850.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Cheryl Cronin 224 Marlborough Street Boston, MA 02116</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hooper & Cronin</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date > 4 1000.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Paul Egeman 77 Westcliff Road Weston, MA 02493</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Retired</p> <p>Aggregate Year-To-Date > 4 1000.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Ronald Finlayson 48 Churchill Street Newton, MA 02460</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Zero Stage Capital</p> <p>Occupation</p> <p>Aggregate Year-To-Date > 4 1000.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Robert Fishman 29 Fairmont Avenue Newton, MA 02458</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date > 6 250.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Richard Gamble 72 Sparks Street Cambridge, MA 02138</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Retired</p> <p>Occupation</p> <p>Aggregate Year-To-Date > 6 400.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 400.00</p>
<p>G. Full Name, Mailing Address and ZIP Code David H. Murphree 241 River Road Carlisle, MA 01741</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date > 4 1000.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>

SUBTOTAL of Receipts This Page (optional) 6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address, and ZIP Code Joseph Ricca 20 Bluegrass Lane Shrewsbury, MA 01545 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dewey Square Group	Date (month, day, year) 11/19/01	Amount of Each Receipt this Period 500.00
	Occupation Consultant Aggregate Year-To-Date \$ 500.00		
B. Full Name, Mailing Address, and ZIP Code Len Fishman 41 Phillips Street, #1 Boston, MA 02114 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Information Requested	Date (month, day, year) 11/19/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date \$ 1000.00		
C. Full Name, Mailing Address, and ZIP Code Daniel Straus 351 Hillcrest Road Englewood, NJ 07601 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Private Investor	Date (month, day, year) 11/19/01	Amount of Each Receipt this Period 1000.00
	Occupation Aggregate Year-To-Date \$ 1000.00		
D. Full Name, Mailing Address, and ZIP Code Thomas Dwyer, Jr. 600 Atlantic Avenue Boston, MA 02110 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Dwyer & Collard	Date (month, day, year) 11/20/01	Amount of Each Receipt this Period 1000.00
	Occupation Attorney Aggregate Year-To-Date \$ 1000.00		
E. Full Name, Mailing Address, and ZIP Code Scott Sperling 4 Moore Road Wayland, MA 01778 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Thomas Lee Co	Date (month, day, year) 11/20/01	Amount of Each Receipt this Period 1000.00
	Occupation Investment Manager Aggregate Year-To-Date \$ 1000.00		
F. Full Name, Mailing Address, and ZIP Code David Kraft 1 Boston Place, 34th Floor Boston, MA 02108 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Kraft Group	Date (month, day, year) 11/27/01	Amount of Each Receipt this Period 2000.00
	Occupation Aggregate Year-To-Date \$ 2000.00		
G. Full Name, Mailing Address, and ZIP Code Frederic Alper 85 East India Road #36B Boston, MA 02110 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self-Employed	Date (month, day, year) 11/19/01	Amount of Each Receipt this Period 2000.00
	Occupation Business Advisor Aggregate Year-To-Date \$ 2000.00		

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

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Woody Kaplan 99 Chuncey Street Boston, MA 02111	The Kaplan Group Conduit: Civil Liberties List*	11/28/01	1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		Aggregate Year-To-Date: \$ 1000.00
B. Full Name, Mailing Address and ZIP Code *Conduit: Civil Liberties List 818 CT Avenue, NW, #1007 Washington, DC 20006 Total of Earmarked Contributions 9/5/01 - 12/31/01 \$1,000.00	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-To-Date: \$
C. Full Name, Mailing Address and ZIP Code Martha Crowninshield 23 Prescott Street Brookline, MA 02446	Name of Employer Self-Employed	Date (month, day, year) 12/7/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Investor		Aggregate Year-To-Date: \$ 1000.00
D. Full Name, Mailing Address and ZIP Code Richard Friedman 20 University Road Cambridge, MA 02138	Name of Employer Carpenter & Co Inc	Date (month, day, year) 12/7/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation President		Aggregate Year-To-Date: \$ 1000.00
E. Full Name, Mailing Address and ZIP Code Swanee Hunt 168 Brattle Street Cambridge, MA 02138	Name of Employer Harvard University	Date (month, day, year) 12/7/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-To-Date: \$ 2000.00
F. Full Name, Mailing Address and ZIP Code Swanee Hunt 168 Brattle Street Cambridge, MA 02138	Name of Employer Harvard University	Date (month, day, year) 12/7/01	Amount of Each Receipt this Period 1000.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-To-Date: \$ 2000.00
G. Full Name, Mailing Address and ZIP Code Michael Whouley 1 Beacon Street Suite 1320 Boston, MA 02108	Name of Employer The Duley Company	Date (month, day, year) 12/7/01	Amount of Each Receipt this Period 1850.00
Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		Aggregate Year-To-Date: \$ 1850.00

SUBTOTAL of Receipts This Page (optional)	6850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 New Hampshire Senate 2002

FEC ID No. C00368787

<p>A. Full Name, Mailing Address and ZIP Code George Abrams 60 State Street Boston, MA 02109</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self-Employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-To-Date \$ 500.00</p>	<p>Date (month, day, year) 12/12/01</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>B. Full Name, Mailing Address and ZIP Code John Albert 681 Main Street Haverhill, MA 01830</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Landmark Health Solutions</p> <p>Occupation Principal</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/12/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Michael Perik 206 Cliff Road Wellesley, MA 02481</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Skills Tutor</p> <p>Occupation Private Investor</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/12/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Elizabeth Beretta Perik 206 Cliff Road Wellesley, MA 02481</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Fleet Bank</p> <p>Occupation Banker</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/12/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Donald Saunders 2 Commonwealth Avenue Boston, MA 02116</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Saunders Real Estate</p> <p>Occupation</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/12/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code Lisa McBirney AuCoin 88 Monroe Road Quincy, MA 02169</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation Homemaker</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/21/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code John E. Drew 7 Rockaway Avenue Marblehead, MA 01945</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Drew Company Real Estate</p> <p>Occupation Realtor</p> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/31/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>6500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p></p>

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 14 OF 14
FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (in Full)

New Hampshire Senate 2002

FEC ID No. CDD368787

<p>A. Full Name, Mailing Address and ZIP Code Gerard M. Martin 20 Church Road Rye Beach, NH 03871</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information Requested</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$ 18000.00</p>	<p>Date (month, day, year) 12/31/01</p>	<p>Amount of Each Receipt this Period 18000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code Kathleen Martin 20 Church Road Rye Beach, NH 03871</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Information requested</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$ 17900.00</p>	<p>Date (month, day, year) 12/31/01</p>	<p>Amount of Each Receipt this Period 17900.00</p>
<p>C. Full Name, Mailing Address and ZIP Code Non-federal contributions received during this period.</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period \$69,550.00 (MEMO)</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-To-Date \gg \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional)</p>	<p>35900.00</p>
<p>TOTAL This Period (last page this line number only)</p>	<p>168400.00</p>

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (in Full)
 New Hampshire Senate 2002

FEC ID No. CD0368787

<p>A. Full Name, Mailing Address and ZIP Code Fleet Boston PAC 100 Federal Street Boston, MA 02110</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 5000.00</p>	<p>Date (month, day, year) 11/6/01</p>	<p>Amount of Each Receipt this Period 5000.00</p>
<p>B. Full Name, Mailing Address and ZIP Code FMR, Corp PAC 82 Devonshire Street Boston, MA 02109</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 2500.00</p>	<p>Date (month, day, year) 11/6/01</p>	<p>Amount of Each Receipt this Period 2500.00</p>
<p>C. Full Name, Mailing Address and ZIP Code UBC New England PAC PO Box 562 Norwalk, CT 06852</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 12/31/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>D. Full Name, Mailing Address and ZIP Code Kirkpatrick & Lockhart PAC 535 Smithfield Road Pittsburgh, PA 15222</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 11/6/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>E. Full Name, Mailing Address and ZIP Code Harborside Health Care Corp PAC 1 Beacon Street Boston, MA 02108</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 11/19/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>F. Full Name, Mailing Address and ZIP Code GPC America Inc, PAC 1 Beacon Street, #1600 Boston, MA 02108</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 1000.00</p>	<p>Date (month, day, year) 11/20/01</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>G. Full Name, Mailing Address and ZIP Code United Food & Commercial Workers Active Ballot Club 1775 K Street, NW Washington, DC 20006</p> <p>Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <hr/> <p>Occupation</p> <hr/> <p>Aggregate Year-To-Date \$ 2500.00</p>	<p>Date (month, day, year) 12/7/01</p>	<p>Amount of Each Receipt this Period 2500.00</p>

SUBTOTAL of Receipts This Page (optional)	14000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

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

NAME OF COMMITTEE (In Full)

New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address and ZIP Code Equitable Resources, Inc Political Involvement One Oxford Center Suite 3300 Pittsburgh, PA 15219 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year) 12/10/01 1000.00	Amount of Each Receipt this Period 1000.00
B. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-To-Date	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	15000.00

SCHEDULE H2

ALLOCATION RATIOS

(effective 1/1/91)

NAME OF COMMITTEE
 New Hampshire Senate 2002

ALLOCATION RATIOS FOR INDIVIDUAL FUNDRAISING EVENTS, EXEMPT ACTIVITIES, AND SHARED DIRECT CANDIDATE SUPPORT APPEARING ON THIS REPORT.

Methods of allocation:

I. **FUNDRAISING** activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.

II. **EXEMPT** activities are allocated using the "time and space method" where the federal proportion of disbursements is based on the proportion of time or space devoted to federal candidates.

III. **Shared DIRECT CANDIDATE** support activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.

NAME OF ACTIVITY OR EVENT	FEDERAL %	NON-FEDERAL %
NHI ACTIVITY IS: . . . <input checked="" type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input checked="" type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED	50.00	50.00
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		
NAME OF ACTIVITY OR EVENT ACTIVITY IS: . . . <input type="checkbox"/> FUNDRAISING . . . <input type="checkbox"/> EXEMPT . . . <input type="checkbox"/> DIRECT CANDIDATE SUPPORT CHECK IF THE RATIO IS: . . . <input type="checkbox"/> NEW . . . <input type="checkbox"/> REVISED . . . <input type="checkbox"/> SAME AS PREVIOUSLY REPORTED		

TRANSFERS FROM
NON-FEDERAL ACCOUNTS

NAME OF COMMITTEE New Hampshire Senate 2002		TOTAL AMOUNT TRANSFERRED
--	--	--------------------------

NAME OF ACCOUNT New Hampshire Senate 2002 Non-Fed'l Individual	DATE OF RECEIPT 12/20/01	\$ 8,552.19
---	-----------------------------	-------------

	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amounts for Each)			
a) NHI		8,552.19	
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support			

NAME OF ACCOUNT	DATE OF RECEIPT	\$
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	BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
i) Total Administrative/Voter Drive			
ii) Direct Fundraising (List Events-Amounts for Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred For Direct Fundraising			
iii) Exempt Activity/Direct Candidate Support (List Events-Amounts For Each)			
a)			
b)			
c)			
d)			
e) Total Amount Transferred for Exempt Activity/Direct Candidate Support			

	TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED		
	ADMIN./VOTER DRIVE AMOUNT	DIRECT FUND-RAISING AMOUNT	EXEMPT ACTIVITY/DIRECT CANDIDATE SUPPORT
SUBTOTAL THIS PAGE		8552.19	8552.19
TOTAL THIS PERIOD		8552.19	8552.19

DISBURSEMENT SCHEDULE H4

(effective 1/1/81)

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE 1 OF 3

FOR LINE 21

NAME OF COMMITTEE

New Hampshire Senate 2002

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Fisher Scientific 1 Liberty Lane Hampton, NH 03842	Travel NH1	10/26/01	1344.00	672.00	672.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
American Management Services 245 Winter Street Waltham, MA 02451	Travel NH1	10/26/01	2016.00	1008.00	1008.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
JD Consulting, Inc 74 Reservoir Street Cambridge, MA 02138	Consulting /Fund-raising NH1	10/31/01	15000.00	7500.00	7500.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Hildy Kuryk 2141 J Street, NW, #804 Washington, DC 20037	Travel NH1	11/2/01	52.40	26.20	26.20
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
Hungerford Printers 1228 Ninth Street, NW Washington, DC 20001	Printing NH1	11/15/01	2254.51	1127.26	1127.25
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
JD Consulting, Inc. 74 Reservoir Street Cambridge, MA 02138	Shipping NH1	11/15/01	458.50	229.25	229.25
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			21125.41	10562.71	10562.70
TOTAL THIS PERIOD					
<small>(Total page for each line only: Fed. share to 21 a) and non-Fed. share to 21 a)</small>					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

DISBURSEMENT SCHEDULE H4

Effective 1/1/91

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE 2 OF 3

FOR LINE 21

NAME OF COMMITTEE

New Hampshire Senate 2002

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bank of America 730 15th Street, NW Washington, DC 20005	Bank Charges NH1	10/31/01	56.76	28.38	28.38
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
UPS PD Box 7247-0244 Philadelphia, PA 19170	Shipping NH1	11/19/01	21.42	10.71	10.71
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Boston Park Plaza Hotel 64 Arlington Street Boston, MA 02116	Facilities/ Catering NH1	11/20/01	6473.77	4236.89	4236.88
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
DSCC-Federal 430 South Capitol, SE Washington, DC 20003	Administrative/Legal NH1	12/11/01	900.00	450.00	450.00
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bank of America 730 15th Street, NW Washington, DC 20005	Bank Charges NH1	11/26/01	39.26	19.63	19.63
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bank of America PO Box 53121 Phoenix, AZ 85072	SEE MEMO ENTRY NH1	12/30/01	519.30	259.65	259.65
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 0 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			10010.51	5005.26	5005.25
TOTAL THIS PERIOD					
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

DISBURSEMENT SCHEDULE H4

Effective 1/1/93

JOINT FEDERAL/NON-FEDERAL
ACTIVITY SCHEDULE

PAGE 3 OF 3

FOR LINE 21

NAME OF COMMITTEE

New Hampshire Senate 2002

A. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
UPS PO Box 7247-0244 Philadelphia, PA 19170	Shipping NH1	12/28/01	14.36	7.18	7.18
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 3 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
B. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
UPS PO Box 7247-0244 Philadelphia, PA 19170	Shipping NH1	12/29/01	6.99	3.50	3.49
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 4 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
C. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
Bank of America 730 15th Street, NW Washington, DC 20005	Bank Charges NH1	12/11/01	55.10	27.55	27.55
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input checked="" type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 5 31,212.37 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
D. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 6 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
E. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 7 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
F. FULL NAME, MAILING ADDRESS & ZIP CODE	PURPOSE/EVENT	DATE	TOTAL AMOUNT	FEDERAL SHARE	NON-FEDERAL SHARE
CATEGORY: <input type="checkbox"/> ADMINISTRATIVE/VOTER DRIVE <input type="checkbox"/> FUNDRAISING <input type="checkbox"/> EXEMPT EVENT YEAR-TO-DATE: 8 <input type="checkbox"/> DIRECT CANDIDATE SUPPORT					
SUBTOTAL OF JOINT FEDERAL AND NON-FEDERAL ACTIVITY THIS PAGE			76.45	38.23	38.22
TOTAL THIS PERIOD			31212.37	15606.20	15,606.17
TOTAL THIS PERIOD FOR THE NON-FEDERAL SHARE (used for line 31 of the detailed summary page)					

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER MEMO

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NAME OF COMMITTEE (In Full)

New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
Boston Park Plaza Hotel Boston, MA	Travel	12/30/01	254.20
Fedex Tennessee	Shipping	12/30/01	29.90
Carey Linkusine Alexandria, VA	Travel	12/30/01	235.20
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	519.30
TOTAL This Period (last page this line number only)	MEMO

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

New Hampshire Senate 2002

FEC ID No. C00368787

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Shaheen for Senate Exploratory Committee 2 1/2 Brown Street Concord, NH 03301	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/01	82000.00
B. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/20/01	35000.00
C. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/01	30000.00
D. Full Name, Mailing Address and ZIP Code Shaheen for Senate Exploratory Committee 2 1/2 Brown Street Concord, NH 03301	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/01	5000.00
E. Full Name, Mailing Address and ZIP Code Democratic Senatorial Campaign Committee 430 S. Capitol Street, SE Washington, DC 20003	Transfer Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/31/01	6000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	158000.00
TOTAL This Period (last page this line number only)	158000.00

United States Senate

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Preparer Date Prepared