

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

OGONOWSKI FOR CONGRESS

ADDRESS (number and street) 110 PELHAM RD

Check if different than previously reported. (ACC) DRACUT MA 01826

2. **FEC IDENTIFICATION NUMBER** C00434480 **CITY** **STATE** MA **ZIP CODE** MA **STATE DISTRICT**

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 10 16 2007 in the State of MA

5. Covering Period 10 01 2007 through 11 05 2007

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 Kathleen Ogonowski

Signature of Treasurer Electronically Filed by Kathleen Ogonowski Date 12 20 2007

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

OGONOWSKI FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	1

D	D
0	5

Y	Y	Y	Y
2	0	0	7

	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)).....	236398.01	692146.92
(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)).....	236398.01	692146.92
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	384323.84	481926.46
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	384323.84	481926.46
8. Cash on Hand at Close of Reporting Period (from Line 27).....	65754.04	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

**POST-ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name
OGONOWSKI FOR CONGRESS

Report Covering the Period: From: To:

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of	COLUMN C Total for
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A) <input type="text" value="136477.00"/> (ii) Unitemized <input type="text" value="48021.01"/> (iii) Total of contributions from individuals <input type="text" value="184498.01"/>	<input type="text" value="10"/> <input type="text" value="16"/> <input type="text" value="2007"/> (date of general election)	<input type="text" value="10"/> <input type="text" value="17"/> <input type="text" value="2007"/> (date after general election) through <input type="text" value="11"/> <input type="text" value="05"/> <input type="text" value="2007"/> (last day of reporting period)
(b) Political Party Committees <input type="text" value="0.00"/>	<input type="text" value="619996.92"/>	<input type="text" value="2122.00"/>
(c) Other Political Committees <input type="text" value="51900.00"/>	<input type="text" value="72150.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
236398.01	692146.92	2122.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	2000.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
236398.01	694146.92	2122.00

POST ELECTION DETAILED SUMMARY PAGE

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Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

OGONOWSKI FOR CONGRESS

Report the covering period

From:

10

01

2007

To:

11

05

2007

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
384323.84	481926.46	148348.42
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

0.00	0.00	0.00
------	------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0.00
------	------	------

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

384323.84	481926.46	148348.42
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

236398.01	692146.92	2122.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

384323.84	481926.46	148348.42
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	213679.87
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	236398.01
25. SUBTOTAL(add Line 23 and Line 24)	450077.88
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	384323.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	65754.04

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 139
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Acton Republican Town Committee

Mailing Address PO BOX 2015

City Acton State MA Zip Code 01720

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 9 / 2 0 0 7

Transaction ID: A5C7AA4A2B77F4CC0890

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
Manchester Republican Town Committee

Mailing Address 22 Raymond St

City Manchester State MA Zip Code 01944

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 2 3 / 2 0 0 7

Transaction ID: AE3D5616D7F13438BBE9

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Needham Republican Town Committee

Mailing Address 51 Ware Road

City Needham State MA Zip Code 02492

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: AAA1242F719E8404F83F

Amount of Each Receipt this Period
 300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Orleans Republican Town Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address PO Box 734		Transaction ID: A7B7442633E3947FABAF
City State Zip Code South Orleans MA 02662	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Information Requested Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Annalee Abelson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 26 Phillips St		Transaction ID: AA133B05E26CA4087BC0
City State Zip Code Andover MA 01810-4040	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Attorney Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Nancy S Anthony		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 103 Old Colony Road		Transaction ID: A25571DD6EF3A46F59CD
City State Zip Code Wellesley MA 02481-2809	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Fernwood Advisors Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation president Election Cycle-to-Date ▼ 1500.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Paul J Avella		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 4 / 2 0 0 7	
Mailing Address 94 Grist Mill Road		Transaction ID: A246033D1F70546C7904	
City State Zip Code Littleton MA 01460-2255		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Raytheon Occupation Program management			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 1100.00	

B. Full Name (Last, First, Middle Initial) Richard Babson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 330 Beacon Street		Transaction ID: A4C63F09D3A8E4210818	
City State Zip Code Boston MA 02116-1153		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Babson United Occupation Executive			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 1000.00	

C. Full Name (Last, First, Middle Initial) Hamilton Bailey		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 20 Mall Road, Suite 100		Transaction ID: A32B85E3E2B3046BC8CB	
City State Zip Code Burlington MA 01803-4129		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bailey Insurance Occupation insurance			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 500.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 33 Euston St

City State Zip Code
Brookline MA 02446-4017

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

Name of Employer
Ophthalmic Consultants of Boston

Occupation
ophthalmologist

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: AFC28151BABE246B99B8

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Gail H. Baldwin

Mailing Address 38 Tarbell Street
Unit 4-C

City State Zip Code
Pepperell MA 01463-1757

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

Name of Employer
retired

Occupation
retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: AC7499DB107F546CF9FB

Amount of Each Receipt this Period
500.00

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

C. Full Name (Last, First, Middle Initial)
Gail H. Baldwin

Mailing Address 38 Tarbell Street
Unit 4-C

City State Zip Code
Pepperell MA 01463-1757

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

Name of Employer
retired

Occupation
retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: A8674740DF58941B88D7

Amount of Each Receipt this Period
1000.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 14 Winthrop Street

City State Zip Code
West Newton MA 02465-2309

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

Name of Employer Occupation
Bain Capital private equity

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: AE7A5A0BC0D2D4C2BA47

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 99 Trapelo Rd.

City State Zip Code
Lincoln MA 01773

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

Name of Employer Occupation
self Attorney

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 7

Transaction ID: A483C124089814D62BB5

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 387 River Road

City State Zip Code
Carlisle MA 01741-1819

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

Name of Employer Occupation
self employed Self Employed

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 7

Transaction ID: ABF6EFA8F93C74202957

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 387 River Rd

City State Zip Code
Carlisle MA 01741-1819

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

Name of Employer Occupation
Vilage Ventures general partner

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 7

Transaction ID: A86C014357ED445EABDE

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Vincent F Barletta

Mailing Address 6 Glenfield East

City State Zip Code
Weston MA 02493-2330

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

Name of Employer Occupation
Barletta Construction president

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
4600.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: AE9809790A2014B4D9D3

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 1 Old Colony Drive

City State Zip Code
Dover MA 02030

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

Name of Employer Occupation
Bain Capital managing director

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: AF32D95A2E31B4960A9E

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **4850.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Daniel H Bathon

Mailing Address 52 Waltham St.

City Lexington State MA Zip Code 02421-5407

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

Name of Employer Windspeed Ventures, LLC Occupation General Partner & Chairman

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 1200.00

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

Transaction ID: A0DCB692F2214412FAAF

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Frank C Belitsky

Mailing Address 350 Longley Road

City Groton State MA Zip Code 01450-1031

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 600.00

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

Transaction ID: A313D354D5CE046E1B03

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address 2 Hearthstone Place

City Andover State MA Zip Code 01810-5421

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

Name of Employer Puddle Duck Daycare Occupation owner/self

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 450.00

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

Transaction ID: A31C885876F9848ADA6D

Amount of Each Receipt this Period
 250.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Berkley Bennett, Jr.

Mailing Address 12 Wayside Farm Lane

City State Zip Code
Hampton NH 03842-1310

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

Name of Employer Occupation
American Airlines Airline Pilot

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
350.00

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

Transaction ID: ADF3056BDF9ED4A07A2D

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 280 Dudley St

City State Zip Code
Brookline MA 02445-5936

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

Name of Employer Occupation
HealthDialing.com CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Transaction ID: A04362275D7614C0498B

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 18 Buttonwood Dr

City State Zip Code
Andover MA 01810-5880

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

Name of Employer Occupation
Water Corp CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 7

Transaction ID: AC1B43698265F4851872

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John R Bertucci		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 0 7	
Mailing Address 50 Hill St		Transaction ID: AEAEACEDD68224F828F3	
City Lexington	State MA	Zip Code 02421-4318	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer M.K.S Instruments Inc.	Occupation Executive	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 4600.00			

Full Name (Last, First, Middle Initial) B. Virginia A Bethke		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 105 Musterfield Road		Transaction ID: AC8801A17FD214AA3AC6	
City Concord	State MA	Zip Code 01742-1600	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self	Occupation Self	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 600.00			

Full Name (Last, First, Middle Initial) C. Robert Bigelow		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 382 Park St		Transaction ID: AA9AB8F6CC06648A7894	
City Montclair	State NJ	Zip Code 07043-2238	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Blue River Assét Mgmt.	Occupation investment advisor	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 2300.00			

SUBTOTAL of Receipts This Page (optional)	5100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Louis F Bigos, Jr.

Mailing Address 12 Orchard St.

City North Dartmouth State MA Zip Code 02747-1949

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: A54914AB8158A443C9F5

Amount of Each Receipt this Period
 100.00

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

B. Full Name (Last, First, Middle Initial)
Ernest A Boch

Mailing Address 190 Summer Street

City Norwood State MA Zip Code 02062-5454

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

Name of Employer Boch Motors Occupation owner

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: ABFCE518F2C004DC68D0

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 111 Old Pickard Rd

City Concord State MA Zip Code 01742-4723

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

Name of Employer US Commission on Civil Rights Occupation lawyer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 0 7

Transaction ID: A64283C63FA05423B814

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	1100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address PO BOX 672

City Hyannis Port State MA Zip Code 02647-0672

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

Name of Employer self Occupation Self

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: A670555CBAFE64E3CAC3

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 154 Balls Hill Road

City Concord State MA Zip Code 01742-5301

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 450.00

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

Transaction ID: A552FC597392C42218E4

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 26 Longmeadow Rd

City Lincoln State MA Zip Code 01773-4810

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A3C9D1484891F4189807

Amount of Each Receipt this Period
 50.00

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

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 26 Longmeadow Rd

City Lincoln State MA Zip Code 01773-4810

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 0 7

Transaction ID: AC929DCED78434A1F927

Amount of Each Receipt this Period
 50.00

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

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

Mailing Address 65 Lockwood Lane

City Riverside State CT Zip Code 06878-1826

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: A3A306B61AB66459F8C7

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address PO Box 248

City Concord State MA Zip Code 01742-0248

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

Name of Employer TJX Cos. Inc Occupation Retailer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A40EDECAE4CC5407BBC3

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Richard H. Churchill, Jr.

Mailing Address 903 Monument St.

City State Zip Code
Concord MA 01742-1863

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

Name of Employer Occupation
The Cottage Venture Capital

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
1500.00

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

Transaction ID: A3DD2C76E49FC4FDCA34

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 8 Sidney Rd

City State Zip Code
Sturbridge MA 01566-1383

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

Name of Employer Occupation
Yankee Spirits president

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: A4934DC7442154076BE6

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 97 Lincoln Rd

City State Zip Code
Wayland MA 01778-1303

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

Name of Employer Occupation
Berkshire Partners managing director

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: AA72CA3E137204CE8886

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 20 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. William Conley		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 272 Lowell Rd, PO Box 9		Transaction ID: A8441E23ACDF945A4893	
City Groton State MA Zip Code 01450-0009	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired Occupation retired	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) B. Thomas Connors		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 30 Kodaya Road		Transaction ID: A5113C53A1DF84BFBB8E	
City Waban State MA Zip Code 02468-2306	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer deutsche bank Occupation employee	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. Maureen Corbett		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 369 Liberty St		Transaction ID: A945F44D0A99643BE974	
City Haverhill State MA Zip Code 01832-1037	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Accountant	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	900.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Christopher H Covington

Mailing Address 75 Central St, 3rd Fl.

City State Zip Code
Boston MA 02109-3411

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

Name of Employer Occupation
Covington Associates Investment banker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: A1B5CD0C489EC41D8881

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 52 Essex Rd

City State Zip Code
Chestnut Hill MA 02467-1317

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

Name of Employer Occupation
MC Venture Capital Venture Capital

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2300.00

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

Transaction ID: AA41AC72901CC483C8BA

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 97 Montague Street

City State Zip Code
Arlington MA 02474-2518

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

Name of Employer Occupation
Denapoli Greenhouse farmer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
600.00

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

Transaction ID: A876FC6231F2F4B94B98

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 33 Commonwealth Ave

City Boston State MA Zip Code 02116-2353

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

Name of Employer G.W.V. International Occupation president

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A8B944107E1EE4BD4985

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 8 Mason Street

City Cambridge St State MA Zip Code

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

Name of Employer self Occupation Self

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: AA5FDAE7627E0406CB26

Amount of Each Receipt this Period
 500.00

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

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

Mailing Address 10 Andrea Drive

City Hopkinton State MA Zip Code 01748-2027

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

Name of Employer Harbour Vest Partners Occupation financial analyst

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: A3DFB7D4311244FEDA10

Amount of Each Receipt this Period
 500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arthur DeMoulas		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 29 Marquilla St.		Transaction ID: A480B27D4072541B78D7
City Lowell	State MA	Zip Code 01852-3102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2300.00	
Name of Employer Market Basket	Occupation Food Distributor	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2300.00	

Full Name (Last, First, Middle Initial) B. Douglas DeMoulas		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address 9 Partridge Hill Rd.		Transaction ID: A4B140A326A934651A04
City Andover	State MA	Zip Code 01810-5809
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer DeMoulas Markets	Occupation retail	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Irene DeMoulas		Date of Receipt MM / DD / YYYY 10 / 05 / 2007
Mailing Address Ithaca Place		Transaction ID: A47030B522F7842AE837
City Andover	State MA	Zip Code 01810
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2300.00	
Name of Employer homemaker	Occupation Homemaker	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 64 Highland Circle

City State Zip Code
Wayland MA 01778-1731

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

Name of Employer Occupation
Jefferies & Co. Financial Consultant

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼
2300.00

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

Transaction ID: A622F9D5D49A445EBA0D

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 31 Arrowood Street

City State Zip Code
Methuen MA 01844-1489

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

Name of Employer Occupation
Beverly Healthcare Executive Director

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼
400.00

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

Transaction ID: A3EBD7443E9734C14A47

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 12 Spencer St

City State Zip Code
Stoneham MA 02180-2616

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

Name of Employer Occupation
AMERICAN TOWERS CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 5 / 2 0 0 7

Transaction ID: A8EB23B6C5263415ABBB

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Hon. Thelma Drake

Mailing Address 2306 Bay Oaks Place

City Norfolk State VA Zip Code 23518-6115

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

Name of Employer US gov Occupation Congresswoman

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: A6A81A03B3B5A4381943

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
Leo R Dumont, Sr.

Mailing Address 19 Lowell Rd

City Dunstable State MA Zip Code 01827-2004

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

Name of Employer Dumont Corp. Occupation CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 9 / 2 0 0 7

Transaction ID: AE477C5EA0B944EACAC1

Amount of Each Receipt this Period
 1000.00

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

C. Full Name (Last, First, Middle Initial)
Wesley H Eaton

Mailing Address 304 Brooksby Village Dr Unit 308

City Peabody State MA Zip Code 01960-8583

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: AD3B3BF53EBDD4A0D8B2

Amount of Each Receipt this Period
 500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 8 Jasper St.

City Westborough State MA Zip Code 01581-3737

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

Name of Employer self Occupation Self

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 4 / 2 0 0 7

Transaction ID: AAA9B7F8BDEC14BE2B4E

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 22 Old Farm Rd

City Hopkinton State MA Zip Code 01748-2135

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

Name of Employer Carruth Management Occupation Managing Member

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A125673E69FDB4C75A5A

Amount of Each Receipt this Period
 2300.00

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

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

Mailing Address 30 Highland Street

City Worcester State MA Zip Code 01609-2704

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 2300.00

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

Transaction ID: A96FC50FA540F4C67B85

Amount of Each Receipt this Period
 2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **4850.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 27 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Simina F		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 250 Scudders Lane		Transaction ID: A34E677CA33EF431F8D5	
City Roslyn State NY Zip Code 11576-1038	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Bear Stearns Asset Management Occupation Portfolio Manager	Election Cycle-to-Date 300.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07			

Full Name (Last, First, Middle Initial) B. Laurie Farris		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 22 Granli Road		Transaction ID: ABA1C49AE7FF74DBDA7D	
City Andover State MA Zip Code 01810-5327	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer NH Air National Guard Occupation Pilot	Election Cycle-to-Date 750.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07			

Full Name (Last, First, Middle Initial) C. Suzanne Fazioli		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 8 Whispering Pines Dr		Transaction ID: A77188DE8105C438A8C5	
City Andover State MA Zip Code 01810-3438	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired Occupation retired	Election Cycle-to-Date 500.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07			

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Duncan L Fox		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 256 Marsh Hill Rd		Transaction ID: A1BF88C19A0EE44C5B43	
City Dracut	State MA	Amount of Each Receipt this Period 500.00	
Zip Code 01826-1414		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Parlex Corporation	Occupation Waste Water Treatment Operator		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) B. Robert Freund		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 62 Peakham Road		Transaction ID: A7C106B25828846A09C9	
City Sudbury	State MA	Amount of Each Receipt this Period 2050.00	
Zip Code 01776-2914		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2050.00		

Full Name (Last, First, Middle Initial) C. Richard Frisbie		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 930 Winter Street		Transaction ID: A430274E02B8945379FC	
City Waltham	State MA	Amount of Each Receipt this Period 2300.00	
Zip Code 02451-1457		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Battery Ventures	Occupation Venture Capital		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2300.00		

SUBTOTAL of Receipts This Page (optional) ▶	4850.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Mel Fuller		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 7	
Mailing Address 1374 Gulfport Run		Transaction ID: A39956DE2B7D643C6811	
City State Zip Code Grayson GA 30017-2917	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Melton Classics Inc.	Occupation President, CEO		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) John Galloway		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 11 Pine Cobble		Transaction ID: A4ACB557D6CD64AE6BC8	
City State Zip Code Plymouth MA 02360-8216	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired		Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Arnold Garrison		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 181 Pine Ridge Rd		Transaction ID: A5C91403DADD444A8AAB	
City State Zip Code Waban MA 02468-1510	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired		Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R. L. Geer

Mailing Address 1605 Wisteria Way

City State Zip Code
Wayland MA 01778-2854

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 750.00

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

Transaction ID: AD316EC2C11BC48A7A7F

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 2 Tulip CirIce

City State Zip Code
Haverhill MA 01830

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 250.00

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

Transaction ID: AED535989CA8846C0810

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 4 Times Square

City State Zip Code
New York NY 10036-6515

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

Name of Employer Skadden, Arps, Slate, Meagher & Flom, Occupation Attorney

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: A9C7FB9C613264799B66

Amount of Each Receipt this Period
300.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Galal Gough		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7		
Mailing Address 8655 Fresno Circle 502C		Transaction ID: A059A3C68A745408EA99		
City State Zip Code Huntington Beach CA 92646-5731	Amount of Each Receipt this Period 400.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C				
Name of Employer retired Occupation retired	Election Cycle-to-Date ▼ 400.00			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07				

Full Name (Last, First, Middle Initial) B. David Gregory		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7		
Mailing Address 300 Summer St		Transaction ID: AB7158FCA47A04AFF9EF		
City State Zip Code Westwood MA 02090-1058	Amount of Each Receipt this Period 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C				
Name of Employer Greylox Occupation venture capitalist	Election Cycle-to-Date ▼ 500.00			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07				

Full Name (Last, First, Middle Initial) C. Donna M. Haas		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 7		
Mailing Address 1998 SW Balata Terrace		Transaction ID: A45E372A0C1A04D51A8B		
City State Zip Code Palm City FL 34990-4323	Amount of Each Receipt this Period 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C				
Name of Employer Information Requested Occupation Information Requested	Election Cycle-to-Date ▼ 500.00			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07				

SUBTOTAL of Receipts This Page (optional) ▶	1400.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John C. Haas		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7	
Mailing Address 1998 SW Balata Terrace		Transaction ID: A809E606401D44647B07	
City State Zip Code Palm City FL 34990-4323	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Global Private Client	Occupation Vice President		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. F Timothy Hegarty		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 55 Black Smith Drive		Transaction ID: AB665079E1C3042E1A64	
City State Zip Code Needham MA 02492-1901	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Norfolk & Dedham Mutual Fire Insurance	Occupation President/CEO		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Jeffrey Hiebert		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 900 W. Rand Rd Apt B305		Transaction ID: A133E0FE970074DFE963	
City State Zip Code Arlington Heights IL 60004-8419	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Midway Amusement Games	Occupation programmer		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional) ▶	1250.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 49 Bushnell Rd

City State Zip Code
Sturbridge MA 01566-1331

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

Name of Employer Occupation
retired retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
750.00

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

Transaction ID: A5D0A2E530569422EAB5

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 14 Whispering Pines Lane

City State Zip Code
Andover MA 01810-3438

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
250.00

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

Transaction ID: A5B19B74A29D34E3A9C3

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Amory Houghton, Jr.

Mailing Address 80 East Market St., Suite 201

City State Zip Code
Corning NY 14830-2722

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

Name of Employer Occupation
Information Requested Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 9 / 2 0 0 7

Transaction ID: AE8082C52403E4598879

Amount of Each Receipt this Period
1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Margaret M Houlahan		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 46 Juniper Circle		Transaction ID: A4B87A3B2DBAE4A489C0	
City State Zip Code Concord MA 01742-4618		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation homemaker Homemaker			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Jake Jacobson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 16 Highland Ave		Transaction ID: A0470DF98321B4369AD5	
City State Zip Code Cambridge MA 02139-1016		Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Information Requested Self			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 4600.00	

Full Name (Last, First, Middle Initial) C. Dennis Jewett		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 149 Groton Road		Transaction ID: A7C7D55799E824AB5A19	
City State Zip Code Westford MA 01886-1337		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation self self-employed			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	3050.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. William Johnson		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 79 Amherst St		Transaction ID: A5DE1A79B7A7649349B0
City State Zip Code Granby MA 01033-9421	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Pleasent St. Auto Body	Occupation owner	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. C Bruce Johnstone		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 827 Charles River St		Transaction ID: AF3DCC69AE48846F3852
City State Zip Code Needham MA 02492-1007	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Fidelity Investments	Occupation Executive	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Robert Jones		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 104 Pelczar Rd		Transaction ID: AE41E326418974500AB8
City State Zip Code Dracut MA 01826-4118	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Jeanne D"Arc Credit Union	Occupation Compliance officer	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Jeanne S Kangas

Mailing Address 959 Hill Rd

City State Zip Code
Boxborough MA 01719-1012

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

Name of Employer Occupation
Arnold and Kangas, PC lawyer

Receipt For: 2007 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special General20-07 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 7

Transaction ID: A18ED9F85352C4505A8A

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 8 Poets Path

City State Zip Code
Wayland MA 01778-3215

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

Name of Employer Occupation
retired retired

Receipt For: 2007 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special General20-07 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: A29E3A668A8C640579E5

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 3 Davis Brook Dr.

City State Zip Code
Natick MA 01760-5460

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

Name of Employer Occupation
Canaccord Adams Analyst

Receipt For: 2007 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼
 Special General20-07 500.00

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

Transaction ID: A2FA22278562B431AAF6

Amount of Each Receipt this Period
500.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Glenn P Kelly

Mailing Address PO Box 544

City Woods Hole State MA Zip Code 02543-0544

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

Name of Employer Woods Hole Golf Club Occupation Golf pro

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 300.00

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

Transaction ID: A0D0A0A3C08EF4DE3A75

Amount of Each Receipt this Period
 300.00

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

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

Mailing Address 26 Butler St., Rear

City Lawrence State MA Zip Code 01841-4243

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

Name of Employer self Occupation farmer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: A6C36D25D5CCF48F9B34

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 245 Oak Hill Circle

City Concord State MA Zip Code 01742-2024

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: ABFF8C1E1145F461F90E

Amount of Each Receipt this Period
 200.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 11 Delaney Drive

City Littleton State MA Zip Code 01460-6212

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

Name of Employer ENSR/ AECOM Corp. Occupation Eng. Executive

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 1250.00

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

Transaction ID: AF1B4B5843C2944C69FE

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 9 Crows Nest Rd.

City Bronxville State NY Zip Code 10708-4801

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

Name of Employer self Occupation Trader

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 205.00

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

Transaction ID: A62654F1C6DEB4761B62

Amount of Each Receipt this Period
 205.00

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

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

Mailing Address 300 Salisbury Street

City Worcester State MA Zip Code 01609-1612

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 9 / 2 0 0 7

Transaction ID: AD05698FE9B294579879

Amount of Each Receipt this Period
 500.00

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

SUBTOTAL of Receipts This Page (optional)	1705.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Lacombe		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7	
Mailing Address 35 Whiley Road		Transaction ID: AF63BE257DD8445178C3	
City Groton	State MA	Zip Code 01450-2207	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. Robert Lacombe		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7	
Mailing Address 35 Whiley Road		Transaction ID: A72C1FE873B304E1CB55	
City Groton	State MA	Zip Code 01450-2207	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Information Requested		Occupation Information Requested	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. C Kevin Landry		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 250 Boylston St. Apt. 6		Transaction ID: ACBE2F62FFAD341D69F3	
City Boston	State MA	Zip Code 02116-3943	Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer TA Associates, Inc		Occupation investment manager	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07		Election Cycle-to-Date 4600.00	

SUBTOTAL of Receipts This Page (optional)	2800.00
TOTAL This Period (last page this line number only)	(Empty box)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John W LaValle		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 1171 Westbend Road		Transaction ID: A2FEA1322EE6D4B32B8E
City State Zip Code Westlake Village CA 91362-5619	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Row 44, Inc	Occupation Financial Manager	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. David Leary		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 623 Route 6A		Transaction ID: AAF7BF93FBC854F3583A
City State Zip Code East Sandwich MA 02537-1445	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Steven Levy		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 7
Mailing Address 59 Pecksland Road		Transaction ID: A1AA085846D374869BD3
City State Zip Code Greenwich CT 06831-3711	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer self	Occupation Homemaker	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL This Period (last page this line number only)	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 58 Ford Road

City State Zip Code
Sudbury MA 01776-1212

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A1E6620E9563C423BA21

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 29 Maquilla St

City State Zip Code
Lowell MA 01852-3102

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

Name of Employer Information Requested Occupation Information Requested

DeMoulas Markets Senior Buyer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 2300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A4D98C4F28C934858914

Amount of Each Receipt this Period
 2300.00

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

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

Mailing Address 3 Crowell Farm Rd

City State Zip Code
Concord MA 01742-5517

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

Name of Employer Information Requested Occupation Information Requested

StudentUniverse.com travel executive

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 1231.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A57DB0CAAFB274203B46

Amount of Each Receipt this Period
 981.00

In-kind:event materials

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

SUBTOTAL of Receipts This Page (optional) ► **3531.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Frederick Livingston Mailing Address 77 Warren Street City Brookline State MA Zip Code 02445-5942 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7 Transaction ID: A617AB17EC7BD42749B9 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Information Requested Election Cycle-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Caleb Loring Mailing Address P.O. Box 235 City Prides Crossing State MA Zip Code 01965-0235 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7 Transaction ID: A0B10A71F1EA842F08DF Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation retired Election Cycle-to-Date ▼ 1250.00	

C. Full Name (Last, First, Middle Initial) Judith Machado Mailing Address 147 Billerica Street City Lowell State MA Zip Code 01852-5407 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7 Transaction ID: A79B0FFCA7C954511834 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Machado and Sons Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Self Employed Election Cycle-to-Date ▼ 750.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 43 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

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

Mailing Address 103 Jimmeny Dr

City State Zip Code
Westford MA 01886

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

Name of Employer Information Requested Occupation
CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: A6145038FE3E34809B2A

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 83 Rindo Pk Dr

City State Zip Code
Lowell MA 01851

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

Name of Employer retired Occupation
retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: A0C4465703B194478864

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 12305 Espalier Place

City State Zip Code
Potomac MD 20854-6247

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

Name of Employer us military Occupation
retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
750.00

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

Transaction ID: A4E9312DCE2504C1D916

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 156 Jones Ave

City State Zip Code
Dracut MA 01826-1504

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

Name of Employer Self-employed Occupation lawyer

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07 Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 7

Transaction ID: A5EFD6A12C5054569A5E

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 376 Broadway PH 2

City State Zip Code
New York NY 10013-3945

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07 Election Cycle-to-Date ▼ 250.00

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

Transaction ID: ACA1432E5473449EDB77

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Michel L Marion

Mailing Address 489 Methuen Rd

City State Zip Code
Dracut MA 01826-1525

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07 Election Cycle-to-Date ▼ 275.00

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

Transaction ID: ADC7A777347224D4E962

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **450.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Ebriham Masalehdan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7
Mailing Address 26 Old Carriage Path		Transaction ID: A5E4968734E90425B9C9
City Groton State MA Zip Code 01450-2007	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Trans Nulosata Occupation Executive	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07 Election Cycle-to-Date 500.00	

B. Full Name (Last, First, Middle Initial) Stephen Mason		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 147 East Merrimack St.		Transaction ID: AFE0EB5BADBD74315B29
City Lowell State MA Zip Code 01852-1208	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Attorney	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07 Election Cycle-to-Date 500.00	

C. Full Name (Last, First, Middle Initial) George Massey		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 6 Mason St.		Transaction ID: AC3F82EEB07164F90842
City Cambridge State MA Zip Code 02138-3417	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer student Occupation student	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special General20-07 Election Cycle-to-Date 2300.00	

SUBTOTAL of Receipts This Page (optional)	3300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Kevin J Matthews

Mailing Address 137 Haynes Road

City State Zip Code
Sudbury MA 01776-1344

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

Name of Employer Collegate Enterprise Occupation Consultant

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 239.00

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

Transaction ID: A2848771B4B33409FA09

Amount of Each Receipt this Period
114.00

In-kind: catering for event

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

B. Full Name (Last, First, Middle Initial)
Kevin J Matthews

Mailing Address 137 Haynes Road

City State Zip Code
Sudbury MA 01776-1344

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

Name of Employer Collegate Enterprise Occupation Consultant

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 239.00

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

Transaction ID: AB40341FE659D4C03AC1

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 270 Littleton Road, Trailer 18

City State Zip Code
Chelmsford MA 01824-3315

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

Name of Employer Verizon Occupation equip. installer

Receipt For: 2007
 Primary General
 Other (specify) ▼
Special General20-07

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 7

Transaction ID: A87ED431BC18A4EC2AFB

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **514.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. P Andrew McLane		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 77 Dean Road		Transaction ID: A5A881DCD5B7246779D6
City State Zip Code Weston MA 02493-2709	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation TA Associates, Inc Investment management		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Francis Meaney		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 45 Bittersweet Lane		Transaction ID: AD375D731EAA94C6696E
City State Zip Code North Chatham MA 02650-1001	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Mintz Levin lawyer		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) C. Gerald Mercier		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 567 Mammoth Road		Transaction ID: AA5BF91EF5D7F4DB8A25
City State Zip Code Dracut MA 01826-6110	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation retired Information Requested		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	1300.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 48 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Pauline Miamis Mailing Address 52 Totman Rd City Dracut State MA Zip Code 01826-4345 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A07C2512DCD2D44738B1 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	7	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	7	/	2	0	0	7														
100.00																							
Name of Employer Information Requested Occupation Homemaker Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>300.00</td> </tr> </table>		300.00																					
300.00																							

B. Full Name (Last, First, Middle Initial) Edward Michaud Mailing Address 12 Highland St City Weston State MA Zip Code 02493-1110 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A12199AF8A570459DA04 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	2	/	2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	1	2	/	2	0	0	7														
100.00																							
Name of Employer self Occupation Doctor Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>700.00</td> </tr> </table>		700.00																					
700.00																							

C. Full Name (Last, First, Middle Initial) John Moffitt Mailing Address 68 Beacon Street City Andover State MA Zip Code 01810-2809 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: AE918C0159EF24B798B6 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	6	/	2	0	0	7	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	0	6	/	2	0	0	7														
250.00																							
Name of Employer Andover Strategies Occupation president Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>350.00</td> </tr> </table>		350.00																					
350.00																							

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 139
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

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

Mailing Address 201 buckminster Road

City State Zip Code
Brookline MA 02445-5805

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

Name of Employer Occupation
Romney for President Campaign Manager

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: AEF4220D9A03B4E62817

Amount of Each Receipt this Period
500.00

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

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

Mailing Address 1 Buttonwood Dr

City State Zip Code
Andover MA 01810

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

Name of Employer Occupation
homemaker Homemaker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 4 / 2 0 0 7

Transaction ID: ADD363A0A47DF4FDE9FF

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 25 Dora Street

City State Zip Code
Dracut MA 01826-1707

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

Name of Employer Occupation
self Stone Mason

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: AE0C096ED3F2144F9B63

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional)	▶	1250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 139
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

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

Mailing Address 3541 E Kingswood Drive

City Springfield State MO Zip Code 65809-4500

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

Name of Employer self Occupation Investor

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 500.00

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

Transaction ID: A42B140AFD88A47CBA06

Amount of Each Receipt this Period
 500.00

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

B. Full Name (Last, First, Middle Initial)
Warren E Norquist

Mailing Address 89 Bradford Road

City Weston State MA Zip Code 02493-2142

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 1250.00

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

Transaction ID: A6DCC47E7948341F381E

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address 267 Methuen Rd

City Dracut State MA Zip Code 01826-1516

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

Name of Employer self employed Occupation farmer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 2200.00

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

Transaction ID: AF1E8A920E07A48E5BE1

Amount of Each Receipt this Period
 100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Albert Ogonowski		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 267 Methuen Rd		Transaction ID: A68BD40B898ED4655973
City Dracut	State MA	Zip Code 01826-1516
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer self employed	Occupation farmer	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 3200.00	

Full Name (Last, First, Middle Initial) B. Laura E Ogonowski		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 315 Marsh Hill Rd		Transaction ID: AD7C9C4BE3783489EBD3
City Dracut	State MA	Zip Code 01826-1419
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 70.00	
Name of Employer student	Occupation student	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 270.00	

Full Name (Last, First, Middle Initial) C. Michael Ogonowski		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 34 Currier Road		Transaction ID: ACBC2DA499B3E4B8393A
City Pelham	State NH	Zip Code 03076-3407
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer City of Pelham	Occupation Policeman	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1570.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 52 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stanley Ogonowski		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 573 Methuen St		Transaction ID: A489929CA2CAC43A0A19	
City State Zip Code Dracut MA 01826-5216	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired Occupation retired	Election Cycle-to-Date ▼ 900.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07			

Full Name (Last, First, Middle Initial) B. Edward Ogonowsky		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 87 Pamela Circle		Transaction ID: AC06F0744E90644F49E7	
City State Zip Code Malden MA 02148-1048	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer retired Occupation retired	Election Cycle-to-Date ▼ 300.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07			

Full Name (Last, First, Middle Initial) C. Michele Paonessa		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 21 Apple Blossom Rd		Transaction ID: AA4D03A72A76F4712954	
City State Zip Code Andover MA 01810-5401	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested Occupation Information Requested	Election Cycle-to-Date ▼ 250.00		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07			

SUBTOTAL of Receipts This Page (optional) ▶	500.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. G.R. Perera		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 121 Old Concord Rd		Transaction ID: A0C462F3756C34A898D8	
City Lincoln	State MA	Zip Code 01773-3602	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer retired	Occupation retired	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) B. Ronald Perkins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 83 Lincoln Rd		Transaction ID: A0B47DCFDD02849B280C	
City Wayland	State MA	Zip Code 01778-1303	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer self	Occupation Consultant	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 250.00			

Full Name (Last, First, Middle Initial) C. Mr. Theodore F Petecki		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7	
Mailing Address 806 Oak St.		Transaction ID: A60CE2CFB212C4F0299D	
City Brockton	State MA	Zip Code 02301-1107	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
Name of Employer Information Requested	Occupation retired	Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	
Election Cycle-to-Date ▼ 1000.00			

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Geoffrey Philips		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 125 Hudson Rd		Transaction ID: A7F0BDB9924AD41BAA0F	
City Sudbury	State MA	Amount of Each Receipt this Period 1000.00	
Zip Code 01776-1666		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer Fidelity Investments	Occupation VP		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Dorothy Pierce		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7	
Mailing Address 33 Hill St.		Transaction ID: A3CE7F3D69C374367A93	
City Lakeville	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 02347-1717		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Ian Pilarczyk		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 37 Granville Road #3		Transaction ID: A64258584C9BE4CC68FA	
City Cambridge	State MA	Amount of Each Receipt this Period 100.00	
Zip Code 02138-6806		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation mediator		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 300.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 295 Meadowbrook Rd.

City State Zip Code
Weston MA 02493-2450

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

Name of Employer Occupation
Apollo Computers CEO

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 0 7

Transaction ID: A1BEC9790DB274AB49FF

Amount of Each Receipt this Period
2300.00

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

B. Full Name (Last, First, Middle Initial)
Robert Puff, Jr.

Mailing Address 731 Manatee Cove

City State Zip Code
Vero Beach FL 32963-3730

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

Name of Employer Occupation
Sands Capital Management Investments

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 0 7

Transaction ID: A72B9CEACFB7849D4B90

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 5773 Cedar Grove

City State Zip Code
Plano TX 75093-8579

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

Name of Employer Occupation
self Jeweler

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
250.00

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

Transaction ID: A8B43A191B4994C039C0

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 60 State Street, Suite 1500

City Boston State MA Zip Code 02109-1800

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

Name of Employer New Boston Group Occupation director

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

2000.00

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

Transaction ID: A42D97CD05484493B9A3

Amount of Each Receipt this Period
 2000.00

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

B. Full Name (Last, First, Middle Initial)
Gunnar M. Reslow

Mailing Address 107 Robin Hill Road

City Chelmsford State MA Zip Code 01824-3833

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 9 / 2 0 0 7

Transaction ID: A5FF49D9156414272B29

Amount of Each Receipt this Period
 200.00

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

C. Full Name (Last, First, Middle Initial)
Gunnar M. Reslow

Mailing Address 107 Robin Hill Road

City Chelmsford State MA Zip Code 01824-3833

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

750.00

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

Transaction ID: AD0286D565D24499587D

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional) ► **2450.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <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 type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 57 / 139
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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Laura Reynolds Mailing Address 153 Garfield Rd City State Zip Code Concord MA 01742-4905 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7 Transaction ID: A7C00FF6F6D604582B76 Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer homemaker Occupation Homemaker Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 2300.00		

B. Full Name (Last, First, Middle Initial) Robert Reynolds Mailing Address 153 Garfield Rd City State Zip Code Concord MA 01742-4905 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7 Transaction ID: A4019AF876F9A4C73BED Amount of Each Receipt this Period 2300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired Occupation retired Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 4600.00		

C. Full Name (Last, First, Middle Initial) Richard Ring Mailing Address 985 Albatross City State Zip Code Yuba City CA 95991-6801 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7 Transaction ID: AB646A10EEADC47B5A37 Amount of Each Receipt this Period 250.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Department of Homeland Security Occupation Customs and Borders Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	4850.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John Rizza		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 23 Lowe Circle		Transaction ID: A156B65F508C045E7B1C	
City State Zip Code Framingham MA 01701-7632		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation NE Cryoganic Center Inc. Business Director			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Patricia Robbins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7	
Mailing Address 917 Maple Street		Transaction ID: A2075B4021064432DBC6	
City State Zip Code Carlisle MA 01741-1249		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation self farmer			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Jonathan Rodney		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 7 Ethelridge Road		Transaction ID: AE5B42E5EDA0645939D7	
City State Zip Code White Plains NY 10605-4105		Amount of Each Receipt this Period 107.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation ASML Engineer			
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional)	707.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Carl F Roediger		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 51 Spring Hill Rd P.O. Box 522		Transaction ID: A5F4BA56C25664A4CA52	
City State Zip Code New Castle NH 03854-0522	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Election Cycle-to-Date ▼ Fire Chief 1250.00		

B. Full Name (Last, First, Middle Initial) Ann D Romney		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 171 Marsh St.		Transaction ID: A690A6495A1064A7CA36	
City State Zip Code Belmont MA 02478-2132	Amount of Each Receipt this Period 2300.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Romney for President Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Election Cycle-to-Date ▼ Executive 4600.00		

C. Full Name (Last, First, Middle Initial) Arnold Rubin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 30 Haven Street		Transaction ID: A05FD7B5EDE8344D0A1E	
City State Zip Code Reading MA 01867-2929	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Election Cycle-to-Date ▼ Information Requested 250.00		

SUBTOTAL of Receipts This Page (optional)	3050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Ronald L. Sargent		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 5 Bridgeton Way		Transaction ID: ADB3866C57BF44478B4D	
City Hopkinton	State MA	Amount of Each Receipt this Period 500.00	
Zip Code 01748-3103		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Robert Schaefer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7	
Mailing Address 93 Nashuaway Road		Transaction ID: A432B2BA82FF74D55873	
City Bolton	State MA	Amount of Each Receipt this Period 1000.00	
Zip Code 01740-1071		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Occupation Information Requested Election Cycle-to-Date ▼ 2500.00	

C. Full Name (Last, First, Middle Initial) Eric Schwalm		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 7	
Mailing Address 22 Codman Dr		Transaction ID: A08722A61121E4382AFF	
City Sudbury	State MA	Amount of Each Receipt this Period 250.00	
Zip Code 01776-1745		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>	
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Occupation Information Requested Election Cycle-to-Date ▼ 250.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 16 Black Oak Rd.

City State Zip Code
Wayland MA 01778-3604

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

Name of Employer Occupation
Gental Dental Dentist

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: A231AB29C639F4F90ADA

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 16 Black Oak Rd.

City State Zip Code
Wayland MA 01778-3604

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

Name of Employer Occupation
Gental Dental Dentist

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 7

Transaction ID: AB6AE3E7301654550A3D

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Mr. Jeffrey D Sheehy

Mailing Address 330 South Main Sreet

City State Zip Code
Andover MA 01810

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

Name of Employer Occupation
Whittemore president

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: A386EA4AA85D542C1860

Amount of Each Receipt this Period
250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Derek A Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address 2 Bridle Path Lane		Transaction ID: AF283B9A195F94DF3844
City State Zip Code Beverly MA 01915-2177	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer castel, inc	Occupation Executive	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Warren C Smith, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 38 Coolidge Lane		Transaction ID: A66940A9CB18B42ECA61
City State Zip Code Dedham MA 02026-5805	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer TH Lee Partners	Occupation investment manager	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Thomas Soviero		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address 24 Commonwealth Ave., #2		Transaction ID: A6C5CA070B7354480B1F
City State Zip Code Boston MA 02116-3110	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Fidelity Investments	Occupation Portfolio Manager	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 139 (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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Dr. Janice E Spada Mailing Address 616 Boston Post Road City State Zip Code Sudbury MA 01776-3376 FEC ID number of contributing federal political committee. C Name of Employer self Occupation Dentist Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 300.00	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">2</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">7</td> </tr> </table> Transaction ID: A686970F0F2454552A1C Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	1		2	0	0	7												

B. Full Name (Last, First, Middle Initial) George Spix Mailing Address One Microsoft Way City State Zip Code Redmond WA 98052-6399 FEC ID number of contributing federal political committee. C Name of Employer Microsoft Occupation Engineer Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 1000.00	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">6</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">2</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">7</td> </tr> </table> Transaction ID: A8DB7923615D54ED1866 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	6		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	6		2	0	0	7												

C. Full Name (Last, First, Middle Initial) Ray Stata Mailing Address PO Box 9106 City State Zip Code Norwood MA 02062-9106 FEC ID number of contributing federal political committee. C Name of Employer Analog Devices Occupation Chairman Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 2000.00	Date of Receipt <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">1</td><td style="border: 1px solid black; padding: 2px;">2</td><td style="border: 1px solid black; padding: 2px;"></td><td style="border: 1px solid black; padding: 2px;">2</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">0</td><td style="border: 1px solid black; padding: 2px;">7</td> </tr> </table> Transaction ID: AF03A91FC163D4536853 Amount of Each Receipt this Period 2000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	2		2	0	0	7												

SUBTOTAL of Receipts This Page (optional) ▶	3100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Campbell Steward		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 7 / 2 0 0 7
Mailing Address 65 Asbury Street		Transaction ID: A0BA91A06B16A4767814
City State Zip Code Topsfield MA 01983-1501	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Information Requested Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Peter F Sullivan, Jr.		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 7 Coffin Drive		Transaction ID: AE9F8B97D9D254FACB95
City State Zip Code Hampton NH 03842-1171	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer NHANG Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation Pilot Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Mr. Tom Sullivan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 1 Copley Drive		Transaction ID: A460F298517634690BD8
City State Zip Code Methuen MA 01844-1736	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer TA Sullivan Realty Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Occupation insurance Election Cycle-to-Date ▼ 350.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 18 Ben Arthurs Way

City State Zip Code
Dover MA 02030-2421

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 9 / 2 0 0 7

Transaction ID: AD44293FA3B984C8887F

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 751 Weed St.

City State Zip Code
New Canaan CT 06840-4019

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: ADD4887C622C649D4AE4

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Elizabeth M. Tousignant

Mailing Address 60 Florry Dr., Unit 8

City State Zip Code
Dracut MA 01826-4024

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

Name of Employer Information Requested Occupation Information Requested
Medford Public Schools Teacher

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 500.00

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

Transaction ID: A0DD276787EA34844BD4

Amount of Each Receipt this Period
 250.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Polly J Townsend

Mailing Address 34 Proctor St.

City Manchester State MA Zip Code 01944

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

Name of Employer homemaker Occupation Homemaker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: AEC05D051B8D943C3A15

Amount of Each Receipt this Period
 100.00

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

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

Mailing Address 115 West Nashville Drive
PO Box 1169

City Nashville State NC Zip Code 27856-1284

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

Name of Employer self Occupation entrepreneur

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 8 / 2 0 0 7

Transaction ID: A0E157562CDFA42AF91A

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 4508 Monument Ave.

City Richmond State VA Zip Code 23230-3729

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

Name of Employer Hunton & Williams LLP Occupation Attorney

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 250.00

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

Transaction ID: A7804DFA5D4224AE8B13

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	600.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 1070 main Street

City State Zip Code
Dunstable MA 01827-1119

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

250.00

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

Transaction ID: A0E9FD490E8C8447FB19

Amount of Each Receipt this Period
250.00

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

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

Mailing Address 14 Loblolly Lane

City State Zip Code
Wayland MA 01778-1408

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

250.00

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

Transaction ID: A9D240960F53143F2A1B

Amount of Each Receipt this Period
100.00

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

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

Mailing Address 14 Loblolly Lane

City State Zip Code
Wayland MA 01778-1408

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

250.00

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

Transaction ID: AB9F0832264C8408FBB0

Amount of Each Receipt this Period
150.00

In-kind:catering for event

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

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Peter S Voss		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 1 Charles St. South Apt. 7-H		Transaction ID: A6AC1D1AA9D3B4454A80 Amount of Each Receipt this Period 1500.00
City Boston State MA Zip Code 02116-5431	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer C. D. C. IXIS ASSET MANAG- EMENT	Occupation Chairman, CEO	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20- 07	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Wayne Vynorius		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 4 Poorhouse Lane		Transaction ID: A5B980C35223F424897C Amount of Each Receipt this Period 250.00
City West Newbury State MA Zip Code 01985-1615	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20- 07	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Wallace Wadman		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 250 Washington St		Transaction ID: AB16EBCB721FA4B26AC8 Amount of Each Receipt this Period 1000.00
City Winchester State MA Zip Code 01890-2129	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Constitution Research Man- agement	Occupation investment advisor	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20- 07	Election Cycle-to-Date ▼ 1000.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jacques Wajsfelner		Date of Receipt MM / DD / YYYY 10 / 10 / 2007
Mailing Address PO Box 636		Transaction ID: A3E9637681FCA46EC8CA
City Weston	State MA	
Zip Code 02493-0004		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Barry Walker		Date of Receipt MM / DD / YYYY 10 / 06 / 2007
Mailing Address 7 Glencairn Rd		Transaction ID: A97FBE31940D046E5A22
City Palm Beach Gardens	State FL	
Zip Code 33418-6839		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Catherine Walkey		Date of Receipt MM / DD / YYYY 10 / 04 / 2007
Mailing Address 8 Hamlins Crossing		Transaction ID: A8098AB2D028845AEA66
City Dover	State MA	
Zip Code 02030-2459		Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer homemaker	Occupation Homemaker	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional)	4300.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 8 Hamlins Crossing

City Dover State MA Zip Code 02030-2459

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

Name of Employer self Occupation Self Employed

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 4 / 2 0 0 7

Transaction ID: AFB50CCD11A5B4618A98

Amount of Each Receipt this Period
 2300.00

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

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

Mailing Address PO Box 754

City Concord State MA Zip Code 01742-0754

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: AE2AF209DED65418C955

Amount of Each Receipt this Period
 2300.00

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

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

Mailing Address 18 Yardley Rd

City Andover State MA Zip Code 01810-5848

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

Name of Employer self Occupation Self Employed

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 0 5 / 2 0 0 7

Transaction ID: A26650F21121248E681A

Amount of Each Receipt this Period
 250.00

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

SUBTOTAL of Receipts This Page (optional)	4850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. James M. Weiss		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address 13 Wright Farm		Transaction ID: AC30C7ECE59FE4FB7B7A
City State Zip Code Concord MA 01742-1528	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Weiss Capital Management	Occupation Investor	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) B. James M. Weiss		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address 13 Wright Farm		Transaction ID: A98A1343E15C940CD99D
City State Zip Code Concord MA 01742-1528	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Weiss Capital Management	Occupation Investor	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 750.00	

Full Name (Last, First, Middle Initial) C. Thomas Welch		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address PO Box 588		Transaction ID: A2C4D7F68CA514A8685E
City State Zip Code Sudbury MA 01776-0588	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer retired	Occupation retired	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 139
	<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Walter Weld		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 7	
Mailing Address 29 Main St		Transaction ID: A60ED33A53FB24957A85	
City Dover	State MA	Amount of Each Receipt this Period 1000.00	
Zip Code 02030-2026		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. Walter Weld		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 29 Main St		Transaction ID: A1D23C958D0D7456194B	
City Dover	State MA	Amount of Each Receipt this Period 300.00	
Zip Code 02030-2026		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer retired	Occupation retired		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1300.00		

Full Name (Last, First, Middle Initial) C. William Weld		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 26 East 93rd Street		Transaction ID: A45EC93101AEF4B838CD	
City New York	State NY	Amount of Each Receipt this Period 400.00	
Zip Code 10128-0626		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
FEC ID number of contributing federal political committee. C			
Name of Employer McDermott, Will & Emery	Occupation partner		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	1700.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 139
	<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)
OGONOWSKI FOR CONGRESS

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

Mailing Address 23 Chadwick Rd

City State Zip Code
Weston MA 02493

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

Name of Employer Occupation
Bain Capital investment executive

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 5 / 2 0 0 7

Transaction ID: A5DBE48C8E9284F388AC

Amount of Each Receipt this Period
1000.00

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

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

Mailing Address 2 Avery St., Apt Unit 37C

City State Zip Code
Boston MA 02111-1019

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

Name of Employer Occupation
homemaker Homemaker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: A6F088D3F288941D0A55

Amount of Each Receipt this Period
2300.00

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

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

Mailing Address 2 Avery St., Unit 37C

City State Zip Code
Boston MA 02111-1019

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

Name of Employer Occupation
Hinkley Chairman

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

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

Transaction ID: A8AEF1CACAB774D8F887

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional)	5600.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 139
	<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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Donald D. Wilson

Mailing Address 36 Fern Street

City Lexington State MA Zip Code 02421-6025

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

Name of Employer self employed Occupation farmer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 0 4 / 2 0 0 7

Transaction ID: A8F3953FBE7AF44FEAFB

Amount of Each Receipt this Period
 250.00

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

B. Full Name (Last, First, Middle Initial)
Donald D. Wilson

Mailing Address 36 Fern Street

City Lexington State MA Zip Code 02421-6025

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

Name of Employer self employed Occupation farmer

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: A505038C1CC414FF2809

Amount of Each Receipt this Period
 250.00

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

C. Full Name (Last, First, Middle Initial)
Katherine B. Winter

Mailing Address 10 Marlborough St.

City Boston State MA Zip Code 02116-2101

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

Name of Employer homemaker Occupation Homemaker

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 300.00

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

Transaction ID: AFE1CBD10FEBD437591D

Amount of Each Receipt this Period
 50.00

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 139
	(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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Mrs. Stella C Wojcik

Mailing Address 27 E. Richardson St

City State Zip Code
Lowell MA 01850-2220

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

Name of Employer retired Occupation retired

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 500.00

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

Transaction ID: ABD26E51FF71A47DA930

Amount of Each Receipt this Period
 250.00

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

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

Mailing Address 414 Brickyard Rd.

City State Zip Code
Freehold NJ 07728-8414

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

Name of Employer self Occupation Artist

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07 Election Cycle-to-Date ▼ 0.00

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

Transaction ID: A11695B9A28DE47258A6

Amount of Each Receipt this Period
 25.00

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

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	136477.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 / 139
	(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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BASF Corporation Employees PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 100 Campus Drive		Transaction ID: A5B6BE2C096D04A1E890	
City Florham	State NJ	Zip Code 07932	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2500.00		

Full Name (Last, First, Middle Initial) B. BASF Corporation Employees PAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 100 Campus Drive		Transaction ID: AF42611CB4C2941B9B6B	
City Florham	State NJ	Zip Code 07932	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. Christopher Shays for Congress Committee		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 98 East Ave		Transaction ID: A5499444CEF5F44ABA8C	
City Norwalk	State CT	Zip Code 06851	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	6000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 139
	(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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) COLDPAC Mailing Address PO Box 40385 City Washington State DC Zip Code 20016 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: AAE7AA60B374C45B09FC Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	5		2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	5		2	0	0	7														
1000.00																							
Name of Employer Occupation Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

B. Full Name (Last, First, Middle Initial) Committee to Elect Kevin Matthews Mailing Address 137 Haynes Rd City Sudbury State MA Zip Code 01776 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: ADA6C8E769AEC4AEC8C2 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	2		2	0	0	7														
100.00																							
Name of Employer Occupation Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>100.00</td> </tr> </table>		100.00																					
100.00																							

C. Full Name (Last, First, Middle Initial) CONA-PAC Mailing Address 110 W. Louisiana Ave Suite 312 City Midland State TX Zip Code 79701 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: A1E8F0EAE2C024966899 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	2		2	0	0	7	1000.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	2		2	0	0	7														
1000.00																							
Name of Employer Occupation Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 Election Cycle-to-Date ▼ <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																					
1000.00																							

SUBTOTAL of Receipts This Page (optional)	2100.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 78 / 139
	(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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CPC-PAC

Mailing Address PO BOX 65312

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: A01D8E11E1D924603B02

Amount of Each Receipt this Period
 5000.00

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

B. Full Name (Last, First, Middle Initial)
Daniel Webster PAC

Mailing Address PO BOX 519

City Rye State NH Zip Code 03870

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: AB82AA79B790744A1847

Amount of Each Receipt this Period
 1000.00

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

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

Mailing Address PO Box 40385

City Washington State DC Zip Code 20016

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: ACCDEBCBA79A3436D810

Amount of Each Receipt this Period
 1000.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 139
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

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

Mailing Address 7315 Wisconsin Ave, Suite 705 E

City State Zip Code
Bethesda MD 20814

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: AEB2B7DEED11C436FA08

Amount of Each Receipt this Period
 1000.00

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

B. Full Name (Last, First, Middle Initial)
Freedom and Security PAC

Mailing Address 1117 Atwood Ct

City State Zip Code
Shakopee MA 55379

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: A4414E09A83F2441EBBB

Amount of Each Receipt this Period
 500.00

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

C. Full Name (Last, First, Middle Initial)
Friends of Jeb Hensarling

Mailing Address PO Box 820504

City State Zip Code
Dallas TX 75382

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 5 / 2 0 0 7

Transaction ID: ABBF2B33230C947EB99D

Amount of Each Receipt this Period
 1000.00

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 / 139
	(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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Friends of John Boehner

Mailing Address 7908 Cincinnati Dayton Road
Suite 1

City State Zip Code
West Chester OH 45069

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: AB78956AD7CFF4D96ABC

Amount of Each Receipt this Period
2000.00

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

B. Full Name (Last, First, Middle Initial)
Friends of Ray LaHood

Mailing Address 4238 North Knoxville

City State Zip Code
Peoria IL 61614

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2000.00

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

Transaction ID: A99333DA0D897461ABD8

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Growth and Prosperity PAC

Mailing Address 2610 Ridge Road

City State Zip Code
Alexandria VA 22302

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

Name of Employer Occupation

Receipt For: 2007
 Primary General
 Other (specify) ▼
 Special General20-07

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 7

Transaction ID: A64CFE3CAFC08482791F

Amount of Each Receipt this Period
2500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 139
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jo Bonner for Congress Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 7
Mailing Address PO Box 851232		Transaction ID: AC2E9F3A940D34A6AA8E
City State Zip Code Mobile AL 36685	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Judy Biggert for Congress		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 6262 South Route 83, Suite 305		Transaction ID: A9B75FB57D3F741178E4
City State Zip Code Willowbrook IL 60521	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. LaTourette For Congress		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 320 Kenarden Dr.		Transaction ID: A98BF30887C6C4C9787D
City State Zip Code Highland Hts. OH 44143	Amount of Each Receipt this Period 2300.00	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 2300.00	

SUBTOTAL of Receipts This Page (optional) ▶	4300.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 139
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Burgess for Congress		Date of Receipt MM / DD / YYYY 10 / 16 / 2007
Mailing Address PO Box 6334		Transaction ID: AF32EC99DD5A041DFBCB
City Denton	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. National Republican Congressional Committee		Date of Receipt MM / DD / YYYY 10 / 03 / 2007
Mailing Address 320 First St, SE		Transaction ID: A1569021F5A84478A88A
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. NFIB		Date of Receipt MM / DD / YYYY 10 / 11 / 2007
Mailing Address 1201 F St, NW Suite 200		Transaction ID: A0F0D05D9DAEB4D0790B
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 139
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. People for Platts Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 1240 Oakdale Dr		Transaction ID: A93D6D2A948F3462FAC9	
City York	State PA	Zip Code 17403	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer		Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Pioneer Pac		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7	
Mailing Address 412 First St Se Suite 100		Transaction ID: A0EFA4584FAED4B5981A	
City Washington	State DC	Zip Code 20003	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		In-kind:lodging <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer		Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Regula For Congress Committee		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7	
Mailing Address 228 South Washington St., Suite 11		Transaction ID: A8C3B2BD48AAD4F06A2A	
City Alexandria	State VA	Zip Code 22314	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer		Occupation	
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07		Election Cycle-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 139
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rely on Your Belief Fund		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 209 Pennsylvania Ave, Se		Transaction ID: A577F35F6224447858B2	
City State Zip Code Washington DC 20003	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 2500.00		

Full Name (Last, First, Middle Initial) B. Republican Main Street PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 1 / 2 0 0 7	
Mailing Address 1220 L St NW, Suite 100-263		Transaction ID: AAEA74C2FC2F94D67B57	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 5000.00		

Full Name (Last, First, Middle Initial) C. SCIPAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address PO Box 3340		Transaction ID: A9D5E711E1D01424FB08	
City State Zip Code Grand Rapids MN 49501	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)		
Name of Employer Occupation	Receipt For: 2007 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07 500.00		

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 / 139
	(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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shelly Moore Capito for Congress		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address PO Box 11519		Transaction ID: AC78AF72852894385B6D
City Charleston	State Zip Code WV 25339	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. Texans for Lamar Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address PO Box 6155		Transaction ID: AAF3E581A77314373B12
City San Antonio	State Zip Code TX 78209	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. The Badger Fund		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address PO Box 373		Transaction ID: AEB136AA746C04CF1BE0
City Fairfax Station	State Zip Code VA 22039	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Occupation		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 139
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. The Freedom Project		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address 424 C Street, NE		Transaction ID: A952BB42E87524AB69AD
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. The Good Fund		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 7
Mailing Address PO Box 3404		Transaction ID: AD0B998CC220D4F5D89A
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Trust PAC- Team Republicans		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 228 South Washington St Suite 115		Transaction ID: A269D071426C7493A896
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General20-07	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	7000.00
TOTAL This Period (last page this line number only)	51900.00

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ABC Mailers		Transaction ID: BDC9E3D3E414745019B6 Date of Disbursement 10 / 01 / 2007
Mailing Address 5301 Tacony St # 102-48		Amount of Each Disbursement this Period 10638.87
City Philadelphia State PA Zip Code 19137	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Mailing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. ABC Mailers		Transaction ID: BCE41B599B9CD463CB1D Date of Disbursement 10 / 05 / 2007
Mailing Address 5301 Tacony St # 102-48		Amount of Each Disbursement this Period 8747.40
City Philadelphia State PA Zip Code 19137	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement mailing/postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. ABC Mailers		Transaction ID: B419FF15154BB4E74BFF Date of Disbursement 10 / 05 / 2007
Mailing Address 5301 Tacony St # 102-48		Amount of Each Disbursement this Period 9046.68
City Philadelphia State PA Zip Code 19137	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement mailing/postage Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ► **28432.95**

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ABC Mailers		Transaction ID: BD08D07C1475E41838FB Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 5301 Tacony St # 102-48		Amount of Each Disbursement this Period 11049.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Philadelphia State PA Zip Code 19137	Purpose of Disbursement mailing/postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. ABC Mailers		Transaction ID: B086B44FACAC248289C5 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 7
Mailing Address 5301 Tacony St # 102-48		Amount of Each Disbursement this Period 4493.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Philadelphia State PA Zip Code 19137	Purpose of Disbursement mailing/postage Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. ABC PAC		Transaction ID: BC3188A20AC474DDDB50 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 7
Mailing Address 228 S. Washington St Suite 115		Amount of Each Disbursement this Period 52.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Alexandria State VA Zip Code 22314	Purpose of Disbursement credit card processing Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	15595.15
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ABC PAC		Transaction ID: BF2A2D1A0D3C042D291E Date of Disbursement 10 / 24 / 2007
Mailing Address 228 S. Washington St Suite 115		Amount of Each Disbursement this Period 336.94
City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement credit card processing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. ABC PAC		Transaction ID: BA7BF24E839104C07864 Date of Disbursement 10 / 24 / 2007
Mailing Address 228 S. Washington St Suite 115		Amount of Each Disbursement this Period 0.90
City Alexandria State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement credit card processing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Alphagraphics		Transaction ID: BA6271A14D3614EF3B34 Date of Disbursement 10 / 06 / 2007
Mailing Address 192 Sudbury Road		Amount of Each Disbursement this Period 258.00
City Concord State MA Zip Code 01742	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Printing	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) **595.84**

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)
OGONOWSKI FOR CONGRESS

A. Alphagraphics Full Name (Last, First, Middle Initial) Mailing Address 192 Sudbury Road City Concord State MA Zip Code 01742 Purpose of Disbursement printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007		Transaction ID: B7E998E4B07434ABDB2A Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7 Amount of Each Disbursement this Period 120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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B. Bank of America Full Name (Last, First, Middle Initial) Mailing Address 4144 Lavista Rd City Tucker State GA Zip Code 30084 Purpose of Disbursement bankcard fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007		Transaction ID: BB1C2EB633874418596C Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7 Amount of Each Disbursement this Period 489.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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C. Bank of America Full Name (Last, First, Middle Initial) Mailing Address 4144 Lavista Rd City Tucker State GA Zip Code 30084 Purpose of Disbursement bankcard fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007		Transaction ID: B5ABA87D1C05041C3BD3 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 2 / 2 0 0 7 Amount of Each Disbursement this Period 51.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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SUBTOTAL of Disbursements This Page (optional) ►

660.75

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: B952DC39F177E47EFABA
Mailing Address 4144 Lavista Rd		Date of Disbursement 10 / 15 / 2007
City Tucker	State GA	Zip Code 30084
Purpose of Disbursement september analysis fee	Category/ Type	Amount of Each Disbursement this Period 72.66
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: BEA5492E83B71438C9D7
Mailing Address 4144 Lavista Rd		Date of Disbursement 11 / 01 / 2007
City Tucker	State GA	Zip Code 30084
Purpose of Disbursement merchant fees	Category/ Type	Amount of Each Disbursement this Period 1052.61
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) C. Bellweather Consulting Group		Transaction ID: B1E5E3F791C6D49D2951
Mailing Address 1775 Eye St., NW Suite 700		Date of Disbursement 10 / 23 / 2007
City Washington	State DC	Zip Code 20006
Purpose of Disbursement fundraising consulting	Category/ Type	Amount of Each Disbursement this Period 500.00
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ► **1625.27**

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bellweather Consulting Group		Transaction ID: BCD96FD3AF3C048E2A19 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7
Mailing Address 1775 Eye St., NW Suite 700		Amount of Each Disbursement this Period 45.32
City Washington State DC Zip Code 20006	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Blast Fax Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Best Western: Chelmsford		Transaction ID: B71FA6C16158341989CB Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 1283.58
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lodging Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Best Western: Chelmsford		Transaction ID: B9FE11CBCB04E44319E1 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 1996.68
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lodging Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

3325.58

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Best Western: Chelmsford		Transaction ID: B32895C9D82C54BB5A5B Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 167.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Best Western: Chelmsford		Transaction ID: B8D2C67001C864B8199E Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 570.48 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Best Western: Chelmsford		Transaction ID: BDDE35ED440184B488A3 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 142.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

880.72

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Best Western: Chelmsford		Transaction ID: B4A9FC3A49F824BA993F Date of Disbursement 10 / 19 / 2007
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 1280.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Best Western: Chelmsford		Transaction ID: BBF3E3AAADB99439EA19 Date of Disbursement 10 / 19 / 2007
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 213.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Best Western: Chelmsford		Transaction ID: B52388BE45AF5481D84E Date of Disbursement 10 / 19 / 2007
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 142.62 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement lodging Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

1636.81

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Best Western: Chelmsford		Transaction ID: BAAA583F7AA8547E4B63 Date of Disbursement 10 / 19 / 2007
Mailing Address 187 Chelmsford St.		Amount of Each Disbursement this Period 213.93
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lodging Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. BusBank		Transaction ID: BF03D73EA59724B3D949 Date of Disbursement 10 / 22 / 2007
Mailing Address 200 W. Adams St Suite 1100		Amount of Each Disbursement this Period 4042.50
City Chicago State IL Zip Code 60606	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement chartered bus for volunteers Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. COLDPAC		Transaction ID: B64F209DC6C8541BEBF6 Date of Disbursement 10 / 25 / 2007
Mailing Address PO Box 40385		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement return item chargeback Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	5256.43
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Comcast		Transaction ID: B1369DD7B9B624F4F8E4 Date of Disbursement 10 / 01 / 2007
Mailing Address 1500 Market St.		Amount of Each Disbursement this Period 120.00
City Philadelphia State PA Zip Code 19102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement cable Candidate Name	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) B. Comcast		Transaction ID: B463E08E8CA35453DA84 Date of Disbursement 10 / 13 / 2007
Mailing Address 1500 Market St.		Amount of Each Disbursement this Period 64.00
City Philadelphia State PA Zip Code 19102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement utilities-cable Candidate Name	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

Full Name (Last, First, Middle Initial) C. Comcast		Transaction ID: B4D79A17264AA4628A5A Date of Disbursement 10 / 23 / 2007
Mailing Address 1500 Market St.		Amount of Each Disbursement this Period 64.00
City Philadelphia State PA Zip Code 19102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement utilities-cable Candidate Name	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	248.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Comp USA		Transaction ID: BD5418E86A3C348FABAE Date of Disbursement 10 / 04 / 2007
Mailing Address 213 Daniel Webster Highway		Amount of Each Disbursement this Period 304.92
City Nashua State NH Zip Code 03060	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement computer accessories Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Complete Campaigns		Transaction ID: BDD2F9FA2CB49454B8D2 Date of Disbursement 10 / 03 / 2007
Mailing Address 610 Gateway Center Way		Amount of Each Disbursement this Period 607.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement campaign management Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Dialing Services LLC		Transaction ID: B1A4E241DE1354704957 Date of Disbursement 10 / 01 / 2007
Mailing Address 5149 Cotton Rd		Amount of Each Disbursement this Period 924.34
City Roswell State NM Zip Code 88201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement phone calls Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	1836.26
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dialing Services LLC		Transaction ID: BD28A694835A4449F8A1 Date of Disbursement 10 / 16 / 2007
Mailing Address 5149 Cotton Rd		Amount of Each Disbursement this Period 39.31
City Roswell State NM Zip Code 88201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement consulting fees Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Dialing Services LLC		Transaction ID: BE1DC3E8CDC4C4B5FB4D Date of Disbursement 10 / 18 / 2007
Mailing Address 5149 Cotton Rd		Amount of Each Disbursement this Period 1615.46
City Roswell State NM Zip Code 88201	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement phone calls Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Donatelli Avella, Inc		Transaction ID: BCCC2B6AE195F483BA86 Date of Disbursement 10 / 07 / 2007
Mailing Address P.O. Box 25748		Amount of Each Disbursement this Period 33710.00
City Alexandria State VA Zip Code 08540	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement printing/mailing Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional)	35364.77
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

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(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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Donatelli Avella, Inc		Transaction ID: B3AF4B5C19D164F0F880 Date of Disbursement 10 / 09 / 2007
Mailing Address P.O. Box 25748		Amount of Each Disbursement this Period 750.00
City Alexandria State VA Zip Code 08540	Purpose of Disbursement printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Donatelli Avella, Inc		Transaction ID: B88D59B9F148148348E3 Date of Disbursement 10 / 24 / 2007
Mailing Address P.O. Box 25748		Amount of Each Disbursement this Period 21258.00
City Alexandria State VA Zip Code 08540	Purpose of Disbursement mailing/printing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Dracut House of Pizza		Transaction ID: BF8E739EEB3954FA98FE Date of Disbursement 10 / 24 / 2007
Mailing Address 1067 Lakeview Ave		Amount of Each Disbursement this Period 760.00
City Dracut State MA Zip Code 01826	Purpose of Disbursement lunch for volunteers Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	22768.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Enillson Inc.		Transaction ID: BED26A8B4D3A64EB7AAB Date of Disbursement <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
Mailing Address 70 Broadway		Amount of Each Disbursement this Period <input type="text" value="9723.38"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Westford State MA Zip Code 01866	Purpose of Disbursement web services Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
B. Full Name (Last, First, Middle Initial) eNilsson		Transaction ID: B1E29E2DD15764DACB01 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
Mailing Address 70 Broadway		Amount of Each Disbursement this Period <input type="text" value="2647.50"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Westford State MA Zip Code 01866	Purpose of Disbursement website consulting Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
C. Full Name (Last, First, Middle Initial) eNilsson		Transaction ID: BFCA52930248E42C1A69 Date of Disbursement <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
Mailing Address 70 Broadway		Amount of Each Disbursement this Period <input type="text" value="100.00"/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Westford State MA Zip Code 01866	Purpose of Disbursement hosting website fee Candidate Name <input type="text"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

12470.88

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Enterprise Rent A Car		Transaction ID: B6A34A421AC3947B6BEF Date of Disbursement 10 / 18 / 2007
Mailing Address 219 Broadway		Amount of Each Disbursement this Period 770.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Methuen State MA Zip Code 01844	Purpose of Disbursement: rental van for GOTV Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Enterprise Rent A Car		Transaction ID: BAD93D0A35D6C4493B47 Date of Disbursement 10 / 18 / 2007
Mailing Address 219 Broadway		Amount of Each Disbursement this Period 770.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Methuen State MA Zip Code 01844	Purpose of Disbursement: rental van for GOTV Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Enterprise Rent A Car		Transaction ID: B5D68803EF11741EBA15 Date of Disbursement 10 / 18 / 2007
Mailing Address 219 Broadway		Amount of Each Disbursement this Period 770.96 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Methuen State MA Zip Code 01844	Purpose of Disbursement: rental van for GOTV Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	2312.88
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Enterprise Rent A Car		Transaction ID: B83397476F60B483CA60 Date of Disbursement 10 / 18 / 2007
Mailing Address 219 Broadway		Amount of Each Disbursement this Period 770.96
City Methuen State MA Zip Code 01844	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement rental van for GOTV		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) B. Exact Targeting		Transaction ID: BF3B8C7673ED2474D937 Date of Disbursement 10 / 09 / 2007
Mailing Address 20 North Meridian St Suite 200		Amount of Each Disbursement this Period 8680.00
City Indianapolis State IN Zip Code 46204	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Email consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) C. FLS Connect		Transaction ID: B7ADB55CF3ED042B2A69 Date of Disbursement 10 / 23 / 2007
Mailing Address 7300 Hudson Blvd. Ste. 270		Amount of Each Disbursement this Period 26383.11
City St. Paul State MN Zip Code 55128	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Paid ID		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

35834.07

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hampshire House		Transaction ID: B1E09D9479A2448358CA Date of Disbursement 10 / 13 / 2007
Mailing Address 84 Beacon St.		Amount of Each Disbursement this Period 600.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boston State MA Zip Code 02108	Purpose of Disbursement deposit for event Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Hampshire House		Transaction ID: B3E8413419F54473C857 Date of Disbursement 10 / 23 / 2007
Mailing Address 84 Beacon St.		Amount of Each Disbursement this Period 700.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Boston State MA Zip Code 02108	Purpose of Disbursement Event location/catering Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. J & C Management		Transaction ID: BB86157E3D5C34DF382B Date of Disbursement 10 / 07 / 2007
Mailing Address 4 Meeting House Rd.		Amount of Each Disbursement this Period 1940.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement rent/utilities Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

3240.05

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. J & C Management		Transaction ID: B1FB86060568D46C6B77 Date of Disbursement 10 / 15 / 2007
Mailing Address 4 Meeting House Rd.		Amount of Each Disbursement this Period 1940.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement rent Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. J & C Management		Transaction ID: B24420483C99243ABA07 Date of Disbursement 10 / 25 / 2007
Mailing Address 4 Meeting House Rd.		Amount of Each Disbursement this Period 1940.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement rent Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. J & C Management		Transaction ID: BDA6CB2640F7D4D7E95D Date of Disbursement 11 / 05 / 2007
Mailing Address 4 Meeting House Rd.		Amount of Each Disbursement this Period 14.72
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement utilities-gas Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	3894.72
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. J & C Management		Transaction ID: BE5B25AD6DA7947799BC Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address 4 Meeting House Rd.		Amount of Each Disbursement this Period 280.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement utilities-electric Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Jamestown Associates		Transaction ID: B96D5FA1BF48A4AC7A6D Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 5 Mapleton Rd Suite 300		Amount of Each Disbursement this Period 9168.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Princeton State NJ Zip Code 08540	Purpose of Disbursement media buy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Jamestown Associates		Transaction ID: B42136A29750243309B2 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 5 Mapleton Rd Suite 300		Amount of Each Disbursement this Period 12915.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Princeton State NJ Zip Code 08540	Purpose of Disbursement media buy Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	22363.36
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)
OGONOWSKI FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Jamestown Associates</p>		<p>Transaction ID: B56789500846E46D2B89 Date of Disbursement 10 / 13 / 2007</p>
<p>Mailing Address 5 Mapleton Rd Suite 300</p>		<p>Amount of Each Disbursement this Period 6600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Princeton State NJ Zip Code 08540</p>	<p>Purpose of Disbursement media buy Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>	
<p>B. Full Name (Last, First, Middle Initial) Jamestown Associates</p>		<p>Transaction ID: BCDF383E871F40E4A29 Date of Disbursement 10 / 13 / 2007</p>
<p>Mailing Address 5 Mapleton Rd Suite 300</p>		<p>Amount of Each Disbursement this Period 15000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Princeton State NJ Zip Code 08540</p>	<p>Purpose of Disbursement media buy Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>	
<p>C. Full Name (Last, First, Middle Initial) Jamestown Associates</p>		<p>Transaction ID: B122E117549CF4CE7944 Date of Disbursement 10 / 17 / 2007</p>
<p>Mailing Address 5 Mapleton Rd Suite 300</p>		<p>Amount of Each Disbursement this Period 16596.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>City Princeton State NJ Zip Code 08540</p>	<p>Purpose of Disbursement media buy Candidate Name Category/Type</p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>	<p>Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>	

SUBTOTAL of Disbursements This Page (optional) ▶

38196.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jamestown Associates		Transaction ID: B9AC832791C974A84850 Date of Disbursement 10 / 17 / 2007
Mailing Address 5 Mapleton Rd Suite 300		Amount of Each Disbursement this Period 5025.00
City Princeton State NJ Zip Code 08540	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement media buy Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Jamestown Associates		Transaction ID: B4A6B6A23B1AD4FADBA5 Date of Disbursement 10 / 17 / 2007
Mailing Address 5 Mapleton Rd Suite 300		Amount of Each Disbursement this Period 13400.00
City Princeton State NJ Zip Code 08540	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement media buy Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Lenzis Restaurant		Transaction ID: B534B1C38EF394FA9AF5 Date of Disbursement 10 / 13 / 2007
Mailing Address 810 Merrimack Ave		Amount of Each Disbursement this Period 187.17
City Dracut State MA Zip Code 01826	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement catering for volunteers Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

18612.17

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lenzis Restaurant		Transaction ID: B541165BD3D96412ABC0 Date of Disbursement 10 / 13 / 2007
Mailing Address 810 Merrimack Ave		Amount of Each Disbursement this Period 500.00
City Dracut State MA Zip Code 01826	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement room & food for election night event		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) B. Magellan Data		Transaction ID: B3FD2BEAC82174793B86 Date of Disbursement 10 / 09 / 2007
Mailing Address 4800 Aspen Creek Drive		Amount of Each Disbursement this Period 1700.00
City Broomfield State CO Zip Code 80020	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement data management		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) C. Matt Wylie Consulting		Transaction ID: BED8EC5B9961D4112AF1 Date of Disbursement 10 / 03 / 2007
Mailing Address 7 Tokeneke Rd Suite 201		Amount of Each Disbursement this Period 6944.29
City Darien State CT Zip Code 06820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement total campaign consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

SUBTOTAL of Disbursements This Page (optional) **9144.29**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matt Wylie Consulting		Transaction ID: B982BB9F43B44405F82A Date of Disbursement 10 / 13 / 2007
Mailing Address 7 Tokeneke Rd Suite 201		Amount of Each Disbursement this Period 6687.43
City Darien State CT Zip Code 06820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement total campaign consulting Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Matt Wylie Consulting		Transaction ID: B0D434DA6FCD14695895 Date of Disbursement 10 / 16 / 2007
Mailing Address 7 Tokeneke Rd Suite 201		Amount of Each Disbursement this Period 7500.00
City Darien State CT Zip Code 06820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Primary Win Bonus Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Matt Wylie Consulting		Transaction ID: BB10257D82C8043AEAE Date of Disbursement 11 / 05 / 2007
Mailing Address 7 Tokeneke Rd Suite 201		Amount of Each Disbursement this Period 587.66
City Darien State CT Zip Code 06820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for gas, travel, parking; Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

14775.09

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matt Wylie Consulting		Transaction ID: B467CDD28376C4359BB1 Date of Disbursement 11 / 05 / 2007
Mailing Address 7 Tokeneke Rd Suite 201		Amount of Each Disbursement this Period 6500.00
City Darien State CT Zip Code 06820	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement total campaign consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. McDonald's Westford		Transaction ID: B2914A9A19CEF40EC992 Date of Disbursement 10 / 15 / 2007
Mailing Address 151 Littleton Rd.		Amount of Each Disbursement this Period 30.00
City Westford State MA Zip Code 01886	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lunch for door knockers Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. McDonald's Westford		Transaction ID: B4E883843EC1E467999F Date of Disbursement 10 / 15 / 2007
Mailing Address 151 Littleton Rd.		Amount of Each Disbursement this Period 150.00
City Westford State MA Zip Code 01886	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lunch for door knockers Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) **6680.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. McDonald's Westford		Transaction ID: B2F55CAC9296342F39FE Date of Disbursement 10 / 15 / 2007
Mailing Address 151 Littleton Rd.		Amount of Each Disbursement this Period 30.00
City Westford State MA Zip Code 01886	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement lunch for door knockers		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) B. National Grid		Transaction ID: B51E7C6B058D74A0D879 Date of Disbursement 10 / 23 / 2007
Mailing Address 1101 Turnpike St		Amount of Each Disbursement this Period 369.66
City North Andover State MA Zip Code 01845	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement electric bill		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) C. Papa Ginos #70		Transaction ID: B153D084DD8D34113B6E Date of Disbursement 10 / 02 / 2007
Mailing Address 29 Chelmsford St.		Amount of Each Disbursement this Period 39.95
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Food for Volunteers		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	439.61
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pioneer Pac		Transaction ID: B0EFA4584FAED4B5981A Date of Disbursement 10 / 16 / 2007
Mailing Address 412 First St Se Suite 100		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:lodging Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Political Web Campaign LLC		Transaction ID: B1E9104A63E8F473EBC8 Date of Disbursement 10 / 24 / 2007
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 450.00
City San Diego State CA Zip Code 92102	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement email service Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Simard Printing		Transaction ID: B6926F6D359A04B14AEB Date of Disbursement 10 / 11 / 2007
Mailing Address 300 Salem Street		Amount of Each Disbursement this Period 220.50
City Woburn State MA Zip Code 01801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement printing Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional)	2670.50
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Simard Printing		Transaction ID: BEF27438E7F2047A8A8C Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 7
Mailing Address 300 Salem Street		Amount of Each Disbursement this Period 1848.99
City Woburn State MA Zip Code 01801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement printing/ mailing Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Simard Printing		Transaction ID: BD916F42987C0441BAA5 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 0 7
Mailing Address 300 Salem Street		Amount of Each Disbursement this Period 1886.60
City Woburn State MA Zip Code 01801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement mailing/ printing Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: BBC87B550F79D4DBAA1B Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 71.38
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	3806.97
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
OGONOWSKI FOR CONGRESS

<p>A. Staples</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 265 Chelmsford St.</p> <p>City Chelmsford State MA Zip Code 01824</p> <p>Purpose of Disbursement office supplies</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: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>		<p>Transaction ID: BEC786D1CEFA84310A7B</p> <p>Date of Disbursement 10 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 56.66</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Staples</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 265 Chelmsford St.</p> <p>City Chelmsford State MA Zip Code 01824</p> <p>Purpose of Disbursement office supplies</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: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>		<p>Transaction ID: BDBC4D13A71B24CC89D0</p> <p>Date of Disbursement 10 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 135.44</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Staples</p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 265 Chelmsford St.</p> <p>City Chelmsford State MA Zip Code 01824</p> <p>Purpose of Disbursement office supplies</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: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007</p>		<p>Transaction ID: BB43240DF235B449C80A</p> <p>Date of Disbursement 10 / 04 / 2007</p> <p>Amount of Each Disbursement this Period 14.89</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

206.99

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: B7449A5464F2A4420AB0 Date of Disbursement 10 / 04 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 75.58
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement office supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: BDE46B316152540DE9B0 Date of Disbursement 10 / 09 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 41.99
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement office supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: B4B5574E65FB84143820 Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 74.08
City Chelmsford State MA Zip Code 01824	Purpose of Disbursement office supplies Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

191.65

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: B8D662EB2119344DCBF8 Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 122.80
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: B485EC2A17DA949BE912 Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 38.82
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: B2F378D0850CD417D9EB Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 351.80
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	513.42
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

<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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Staples		Transaction ID: BA0E1D310B3CE4428B8B Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 396.88
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Staples		Transaction ID: B34DFD05E688643D094B Date of Disbursement 10 / 15 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 29.43
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Staples		Transaction ID: BE1E7418D7F72433594E Date of Disbursement 10 / 16 / 2007
Mailing Address 265 Chelmsford St.		Amount of Each Disbursement this Period 63.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement office supplies Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	489.31
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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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)
OGONOWSKI FOR CONGRESS

A. Staples
Full Name (Last, First, Middle Initial)
Transaction ID: B2E43F61C09124CBEAC8
Date of Disbursement

Mailing Address 252 Daniel Webster Highway

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	7	

City State Zip Code
Nashua NH 03060

Amount of Each Disbursement this Period

128.99

Purpose of Disbursement
office supplies

Category/ Type

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

Candidate Name

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
Special General2007
State: District:

B. Subway
Full Name (Last, First, Middle Initial)
Transaction ID: B14825345CF654AE6BC3
Date of Disbursement

Mailing Address 48 Chelmsford St #3

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

City State Zip Code
Chelmsford MA 01824

Amount of Each Disbursement this Period

229.97

Purpose of Disbursement
food for volunteers

Category/ Type

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

Candidate Name

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
Special General2007
State: District:

C. Targeted Creative Communications
Full Name (Last, First, Middle Initial)
Transaction ID: BAFDB07B361134166AB0
Date of Disbursement

Mailing Address 106 South Columbus St.

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	3		2	0	7	

City State Zip Code
Alexandria VA 22314

Amount of Each Disbursement this Period

7650.00

Purpose of Disbursement
tele town hall

Category/ Type

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

Candidate Name

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
Special General2007
State: District:

SUBTOTAL of Disbursements This Page (optional)

8008.96

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)

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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TeleTown Hall		Transaction ID: B1FC950D883AD4AE0AA9 Date of Disbursement 10 / 09 / 2007
Mailing Address 5101 MacArthur Blvd, NW Suite 200		Amount of Each Disbursement this Period 4176.52
City Washington State DC Zip Code 20016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement tele town hall Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. TeleTown Hall		Transaction ID: BC0E2E066B83F4758A95 Date of Disbursement 10 / 09 / 2007
Mailing Address 5101 MacArthur Blvd, NW Suite 200		Amount of Each Disbursement this Period 3230.11
City Washington State DC Zip Code 20016	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement tele town hall Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: B291F875633B249BFAA0 Date of Disbursement 10 / 01 / 2007
Mailing Address 45 Alpine Ln		Amount of Each Disbursement this Period 205.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement stamps Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

7611.63

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Transaction ID: B0EA8A310A76340ADB31 Date of Disbursement 10 / 09 / 2007
Mailing Address 45 Alpine Ln		Amount of Each Disbursement this Period 16.25
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: B23BFBA1C43094F3AB57 Date of Disbursement 10 / 11 / 2007
Mailing Address 45 Alpine Ln		Amount of Each Disbursement this Period 350.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: BE420C25FB0654430A55 Date of Disbursement 10 / 11 / 2007
Mailing Address 45 Alpine Ln		Amount of Each Disbursement this Period 10245.00
City Chelmsford State MA Zip Code 01824	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement postage Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional)

10611.25

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Whaleback Systems Corporation		Transaction ID: B2D60B5DAD684493D832 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 110 Corporate Dr.		Amount of Each Disbursement this Period 500.00
City Portsmouth State NH Zip Code 03801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement installment of extra phone lines		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) B. Whaleback Systems Corporation		Transaction ID: BE79E2160FF2E45BA816 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 110 Corporate Dr.		Amount of Each Disbursement this Period 1208.85
City Portsmouth State NH Zip Code 03801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Utilities-phone		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

Full Name (Last, First, Middle Initial) C. Whaleback Systems Corporation		Transaction ID: BE9AEFC1ED1B84F4CBCF Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 110 Corporate Dr.		Amount of Each Disbursement this Period 500.00
City Portsmouth State NH Zip Code 03801	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement installment of extra phone lines		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2208.85
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Whaleback Systems Corporation		Transaction ID: B356EE697A2A74D389C2 Date of Disbursement 10 / 10 / 2007
Mailing Address 110 Corporate Dr.		Amount of Each Disbursement this Period 1239.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement utilities-phone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Whaleback Systems Corporation		Transaction ID: B5E204CBA7DE54EAB94F Date of Disbursement 10 / 30 / 2007
Mailing Address 110 Corporate Dr.		Amount of Each Disbursement this Period 12908.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Portsmouth State NH Zip Code 03801	Purpose of Disbursement utilities-phone Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Dan Diorio		Transaction ID: B5B8144E77F624B5AAE7 Date of Disbursement 10 / 07 / 2007
Mailing Address 1008 Fox Hollow Rd		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Stroudsburg State PA Zip Code 18360-9742	Purpose of Disbursement scheduling/field consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

15147.95

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dan Diorio		Transaction ID: BCE7B65782C13450CAE9 Date of Disbursement 10 / 09 / 2007
Mailing Address 1008 Fox Hollow Rd		Amount of Each Disbursement this Period 1000.00
City Stroudsburg State PA Zip Code 18360-9742	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement scheduling/field consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Dan Diorio		Transaction ID: BAE96137693D148E18A1 Date of Disbursement 10 / 24 / 2007
Mailing Address 1008 Fox Hollow Rd		Amount of Each Disbursement this Period 1000.00
City Stroudsburg State PA Zip Code 18360-9742	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement scheduling/field consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Barry Flynn		Transaction ID: B2745FCB6B21E4B73B75 Date of Disbursement 10 / 01 / 2007
Mailing Address 37 Webster St.		Amount of Each Disbursement this Period 381.50
City Arlington State MA Zip Code 02474-3317	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) **2381.50**

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Barry Flynn		Transaction ID: BCD75B0620A004A058FD Date of Disbursement 10 / 16 / 2007
Mailing Address 37 Webster St.		Amount of Each Disbursement this Period 1000.00
City Arlington State MA Zip Code 02474-3317	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Barry Flynn		Transaction ID: BA594C20F83384F8F8C4 Date of Disbursement 10 / 16 / 2007
Mailing Address 37 Webster St.		Amount of Each Disbursement this Period 336.79
City Arlington State MA Zip Code 02474-3317	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for food, gas, parking Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Mark Harris		Transaction ID: B0F0D4EF385E74B7CAB9 Date of Disbursement 10 / 03 / 2007
Mailing Address 2627 N Roosevelt St.		Amount of Each Disbursement this Period 1750.00
City Arlington State VA Zip Code 22207-1011	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement field/GOTV consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

3086.79

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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mark Harris		Transaction ID: B99316FC6EFA347BF80C Date of Disbursement 10 / 09 / 2007
Mailing Address 2627 N Roosevelt St.		Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Arlington State VA Zip Code 22207-1011	Purpose of Disbursement field/GOTV consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Mark Harris		Transaction ID: B31BA8443CA7842FCAB5 Date of Disbursement 10 / 24 / 2007
Mailing Address 2627 N Roosevelt St.		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Arlington State VA Zip Code 22207-1011	Purpose of Disbursement field/GOTV consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Nathan Humphrey		Transaction ID: BF2A5A4E98C3F4922BAC Date of Disbursement 10 / 03 / 2007
Mailing Address 1902 Brookhaven Cr., NE		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Atlanta State GA Zip Code 30319-5415	Purpose of Disbursement field/GOTV consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	3750.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nathan Humphrey		Transaction ID: B0CE91B29B1B642CF967 Date of Disbursement 10 / 09 / 2007
Mailing Address 1902 Brookhaven Cr., NE		Amount of Each Disbursement this Period 1000.00
City Atlanta State GA Zip Code 30319-5415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement field/GOTV consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Nathan Humphrey		Transaction ID: BFF923E07F05E445EB31 Date of Disbursement 10 / 24 / 2007
Mailing Address 1902 Brookhaven Cr., NE		Amount of Each Disbursement this Period 500.00
City Atlanta State GA Zip Code 30319-5415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement field/GOTV consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Nathan Humphrey		Transaction ID: BBB6CCFC2089C46BC860 Date of Disbursement 11 / 05 / 2007
Mailing Address 1902 Brookhaven Cr., NE		Amount of Each Disbursement this Period 230.00
City Atlanta State GA Zip Code 30319-5415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for travel, gas, food; no Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	1730.00
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Barney Keller		Transaction ID: B923A059DD2214366934 Date of Disbursement 10 / 03 / 2007
Mailing Address 276 Hanover St. Apt. 1		Amount of Each Disbursement this Period 1500.00
City Boston State MA Zip Code 02113-1825	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement communications consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Barney Keller		Transaction ID: B58B8BE2974614F7F91B Date of Disbursement 10 / 07 / 2007
Mailing Address 276 Hanover St. Apt. 1		Amount of Each Disbursement this Period 1500.00
City Boston State MA Zip Code 02113-1825	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement communications consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Barney Keller		Transaction ID: B0515B82D8B4D4037B2A Date of Disbursement 10 / 09 / 2007
Mailing Address 276 Hanover St. Apt. 1		Amount of Each Disbursement this Period 1500.00
City Boston State MA Zip Code 02113-1825	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement communications consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Barney Keller		Transaction ID: B175571369C734C188DF Date of Disbursement 10 / 09 / 2007
Mailing Address 276 Hanover St. Apt. 1		Amount of Each Disbursement this Period 340.80
City Boston State MA Zip Code 02113-1825	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for travel, parking, food; Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Barney Keller		Transaction ID: BF58080AAA11C4A42B28 Date of Disbursement 10 / 24 / 2007
Mailing Address 276 Hanover St. Apt. 1		Amount of Each Disbursement this Period 1000.00
City Boston State MA Zip Code 02113-1825	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement communications consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. John Littlefield		Transaction ID: B57DB0CAAFB274203B46 Date of Disbursement 10 / 05 / 2007
Mailing Address 3 Crowell Farm Rd		Amount of Each Disbursement this Period 981.00
City Concord State MA Zip Code 01742-5517	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind:event materials Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	2321.80
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s)
for each category of the
Detailed Summary 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. George Maliszewski		Transaction ID: B0703DE8994FB4883920 Date of Disbursement 10 / 15 / 2007
Mailing Address 12305 Espalier Place		Amount of Each Disbursement this Period 250.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Potomac State MD Zip Code 20854-6247	Purpose of Disbursement return item chargeback Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Kevin J Matthews		Transaction ID: B2848771B4B33409FA09 Date of Disbursement 10 / 12 / 2007
Mailing Address 137 Haynes Road		Amount of Each Disbursement this Period 114.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sudbury State MA Zip Code 01776-1344	Purpose of Disbursement In-kind:catering for event Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Dustin M Olson		Transaction ID: BC3127BB76DE44179BF4 Date of Disbursement 10 / 03 / 2007
Mailing Address P.O. Box 456		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Limon State CO Zip Code 80828-0456	Purpose of Disbursement campaign management consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	2864.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dustin M Olson		Transaction ID: BCB4A7CE4672B4E81B91 Date of Disbursement 10 / 09 / 2007
Mailing Address P.O. Box 456		Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Limon State CO Zip Code 80828-0456	Purpose of Disbursement campaign management consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Dustin M Olson		Transaction ID: BCD9AFF04684340D78F0 Date of Disbursement 10 / 24 / 2007
Mailing Address P.O. Box 456		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Limon State CO Zip Code 80828-0456	Purpose of Disbursement campaign management consulting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Adam Percy		Transaction ID: B6C08AF56C6DA45A29C1 Date of Disbursement 10 / 16 / 2007
Mailing Address 9 Basswood Lane		Amount of Each Disbursement this Period 425.87 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Andover State MA Zip Code 01810-5883	Purpose of Disbursement reimbursement for parking, travel, food; Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) **7925.87**

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)

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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alicia Preston		Transaction ID: B77267454915F44BE8AD Date of Disbursement 10 / 16 / 2007	
Mailing Address 25 Tuttle Ave		Amount of Each Disbursement this Period 1800.00	
City Hampton State NH Zip Code 03842-3237	Purpose of Disbursement communications consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type	

Full Name (Last, First, Middle Initial) B. Delores Quigley		Transaction ID: B995998EA4E2D48BEADF Date of Disbursement 10 / 23 / 2007	
Mailing Address 5533 Navaho Dr		Amount of Each Disbursement this Period 328.00	
City Pensacola State FL Zip Code 32507-8759	Purpose of Disbursement reimbursement for postage purchase Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type	

Full Name (Last, First, Middle Initial) C. Sheila M Richardson		Transaction ID: B776FC298758C47CABC6 Date of Disbursement 10 / 06 / 2007	
Mailing Address P.O. Box 172		Amount of Each Disbursement this Period 500.00	
City Dracut State MA Zip Code 01826-0172	Purpose of Disbursement individual consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

2628.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Sheila M Richardson		Transaction ID: BF12717BC4CD04050BC6 Date of Disbursement 10 / 09 / 2007
Mailing Address P.O. Box 172		Amount of Each Disbursement this Period 500.00
City Dracut State MA Zip Code 01826-0172	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement individual consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

B. Full Name (Last, First, Middle Initial) Sheila M Richardson		Transaction ID: BB59CA3CB1CC64D9AB54 Date of Disbursement 10 / 24 / 2007
Mailing Address P.O. Box 172		Amount of Each Disbursement this Period 200.00
City Dracut State MA Zip Code 01826-0172	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for travel, parking, food Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

C. Full Name (Last, First, Middle Initial) Matthew R Talancy		Transaction ID: B9874DFB993E6433BBE6 Date of Disbursement 10 / 03 / 2007
Mailing Address 445 Malden St		Amount of Each Disbursement this Period 1450.00
City Holden State MA Zip Code 01520-2115	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Field/GOTV consulting Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) **2150.00**

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input 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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew R Talancy		Transaction ID: B3C45CCC60C1E4FA0AB2 Date of Disbursement 10 / 09 / 2007
Mailing Address 445 Malden St		Amount of Each Disbursement this Period 1450.00
City Holden State MA Zip Code 01520-2115	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Field/GOTV consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Matthew R Talancy		Transaction ID: BEA6DF5197675481EAC7 Date of Disbursement 10 / 09 / 2007
Mailing Address 445 Malden St		Amount of Each Disbursement this Period 636.57
City Holden State MA Zip Code 01520-2115	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for travel, parking, food;	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Matthew R Talancy		Transaction ID: B86DD0B7FE08D49AAB5D Date of Disbursement 10 / 24 / 2007
Mailing Address 445 Malden St		Amount of Each Disbursement this Period 1000.00
City Holden State MA Zip Code 01520-2115	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Field/GOTV consulting	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional)	3086.57
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)
OGONOWSKI FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Peter Towey		Transaction ID: BE35C4274CFA3434B922 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 8027 East Columbus Ave		Amount of Each Disbursement this Period 333.33
City Scottsdale State AZ Zip Code 85251-4809	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GOTV consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
B. Full Name (Last, First, Middle Initial) Peter Towey		Transaction ID: BD4F1295E31FA47E8AC6 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 8027 East Columbus Ave		Amount of Each Disbursement this Period 1000.00
City Scottsdale State AZ Zip Code 85251-4809	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GOTV consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	
C. Full Name (Last, First, Middle Initial) Peter Towey		Transaction ID: BE1ADB059E03049039A5 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 8027 East Columbus Ave		Amount of Each Disbursement this Period 500.00
City Scottsdale State AZ Zip Code 85251-4809	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement GOTV consulting Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶

1833.33

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alan Vogt		Transaction ID: BB9F0832264C8408FBBO Date of Disbursement 10 / 12 / 2007	
Mailing Address 14 Loblolly Lane		Amount of Each Disbursement this Period 150.00	
City Wayland State MA Zip Code 01778-1408	Purpose of Disbursement In-kind:catering for event Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/Type	

Full Name (Last, First, Middle Initial) B. Steve Whitmore		Transaction ID: B1A7FA0F65E0B419EACD Date of Disbursement 10 / 08 / 2007	
Mailing Address PO Box 225		Amount of Each Disbursement this Period 382.00	
City Newburyport State MA Zip Code 01950-0225	Purpose of Disbursement IT consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/Type	

Full Name (Last, First, Middle Initial) C. Steve Whitmore		Transaction ID: B7629036F235942A6AAE Date of Disbursement 10 / 09 / 2007	
Mailing Address PO Box 225		Amount of Each Disbursement this Period 724.56	
City Newburyport State MA Zip Code 01950-0225	Purpose of Disbursement IT consulting Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	Category/Type	

SUBTOTAL of Disbursements This Page (optional) ►

1256.56

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)
OGONOWSKI FOR CONGRESS

<p>A. Steve Whitmore Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 225</p> <p>City Newburyport State MA Zip Code 01950-0225</p> <p>Purpose of Disbursement IT consulting</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>Transaction ID: BC02C6C0BA81C4A18BA6</p> <p>Date of Disbursement</p> <p>10 / 24 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>491.98</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Special General2007</p> <p>Category/Type</p>		

<p>B. Ethan A Zorfaz Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 41 Maywood Street Apt 1</p> <p>City Worcester State MA Zip Code 01603-2707</p> <p>Purpose of Disbursement finance consulting</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>Transaction ID: B1B2BDAC75BAA4EF2800</p> <p>Date of Disbursement</p> <p>10 / 07 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>1200.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Special General2007</p> <p>Category/Type</p>		

<p>C. Ethan A Zorfaz Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 41 Maywood Street Apt 1</p> <p>City Worcester State MA Zip Code 01603-2707</p> <p>Purpose of Disbursement reimbursement for travel, parking, food;</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>Transaction ID: B94F94CC508E64DCDBCF</p> <p>Date of Disbursement</p> <p>10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period</p> <p>59.73</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2007</p> <p><input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Special General2007</p> <p>Category/Type</p>		

SUBTOTAL of Disbursements This Page (optional) ▶

1751.71

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)

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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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ethan A Zorfas		Transaction ID: B0256DE2DCB32453492E Date of Disbursement 10 / 09 / 2007
Mailing Address 41 Maywood Street Apt 1		Amount of Each Disbursement this Period 1200.00
City Worcester State MA Zip Code 01603-2707	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement finance consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) B. Ethan A Zorfas		Transaction ID: B3EFE56D519A94E84BA9 Date of Disbursement 10 / 09 / 2007
Mailing Address 41 Maywood Street Apt 1		Amount of Each Disbursement this Period 139.13
City Worcester State MA Zip Code 01603-2707	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement reimbursement for travel, parking, food;		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

Full Name (Last, First, Middle Initial) C. Ethan A Zorfas		Transaction ID: B69A1A9B778804246860 Date of Disbursement 10 / 24 / 2007
Mailing Address 41 Maywood Street Apt 1		Amount of Each Disbursement this Period 1000.00
City Worcester State MA Zip Code 01603-2707	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement finance consulting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007	

SUBTOTAL of Disbursements This Page (optional) ▶	2339.13
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)
OGONOWSKI FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ethan A Zorfas		Transaction ID: B3BE6ADAE2DA9444D9C5 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	0	2	/	2	0	0	7														
Mailing Address 41 Maywood Street Apt 1		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00																			
1000.00																							
City Worcester State MA Zip Code 01603-2707	Purpose of Disbursement total organization consulting Candidate Name Category/Type																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special General2007																						
		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																					

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	382572.63