

**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

Jean Hay Bright US

ADDRESS (number and street) 4262 Kennebec Rd

Check if different than previously reported. (ACC)

Dixmont ME 04932

2. **FEC IDENTIFICATION NUMBER** C00411504

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

CITY STATE ZIP CODE STATE DISTRICT

ME

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on in the State of

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

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

Election on in the State of

5. Covering Period 07 01 2006 through 09 30 2006

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

Type or Print Name of Treasurer David Bright

Signature of Treasurer Date

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

Jean Hay Bright US

Report Covering the Period:

From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	36971.21	66775.22
(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)).....	36971.21	66775.22
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	28863.65	71405.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	289.95
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	28863.65	71115.18
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>8227.32</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name  
Jean Hay Bright US

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

16064.00

23294.00

(ii) Unitemized.....

10251.21

28290.38

(iii) TOTAL of contributions

26315.21

51584.38

from individuals..... ▶

1250.00

1574.00

(b) Political Party Committees.....

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

8900.00

11000.00

(d) The Candidate.....

506.00

2616.84

(e) TOTAL CONTRIBUTIONS (other than loans)

36971.21

66775.22

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

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

0.00

0.00

13. LOANS

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

0.00

13159.84

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

0.00

13159.84

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

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

0.00

289.95

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

0.00

8.64

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

36971.21

80233.65

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	28863.65	71405.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	500.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	28863.65	71905.13

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	119.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	36971.21
25. SUBTOTAL (add Line 23 and Line 24).....	37090.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28863.65
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8227.32

**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 5 / 41
	<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)  
Jean Hay Bright US

<b>A.</b> Full Name (Last, First, Middle Initial) Laurie V Adams Mailing Address P.O. Box 1094 City Camden State ME Zip Code 04843 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6776533 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	0	7		2	0		2	0	0	6	250.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	0		2	0	0	6														
250.00																							
Name of Employer self Occupation artist, jeweler Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table>		250.00																					
250.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Lu Bauer Mailing Address PO Box 457 City Windham State ME Zip Code 04062-0457 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>8</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6776496 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</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	0	8		1	3		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	3		2	0	0	6														
500.00																							
Name of Employer self Occupation CPA Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>750.00</td> </tr> </table>		750.00																					
750.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Ben Bernard Mailing Address PO Box 70 City Cliff Island State ME Zip Code 04019 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>7</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: C6837986 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	0	7		2	1		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	7		2	1		2	0	0	6														
100.00																							
Name of Employer Cliff Island Software Occupation Software Designer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ <table border="1"> <tr> <td>225.00</td> </tr> </table>		225.00																					
225.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>850.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 6 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A.</b> Full Name (Last, First, Middle Initial) Ben Bernard</p> <p>Mailing Address PO Box 70</p> <p>City State Zip Code Cliff Island ME 04019</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Cliff Island Software Software Designer</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">225.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 1 7 / 2 0 0 6</span></p> <p><b>Transaction ID:</b> C6764641</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p><b>B.</b> Full Name (Last, First, Middle Initial) Richard Burk</p> <p>Mailing Address 1156 US RT 1</p> <p>City State Zip Code Stockton Springs ME 04981</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Convergys Sr. Systems Analyst</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">1125.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 7 / 2 2 / 2 0 0 6</span></p> <p><b>Transaction ID:</b> C6776548</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">1000.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) John Christensen</p> <p>Mailing Address 4 Tarratine Drive</p> <p>City State Zip Code Brunswick ME 04011</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Bigelow Laboratory Oceanographer</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">0 8 / 0 7 / 2 0 0 6</span></p> <p><b>Transaction ID:</b> C6776545</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	--

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1400.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 7 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A.</b> John William Collins M.D.		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2006
Mailing Address 608 Neck Rd		<b>Transaction ID:</b> C6824460
City State Zip Code China ME 04358-4135	Amount of Each Receipt this Period 700.00	
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 US Dept of Veterans Affairs Occupation Physician	Election Cycle-to-Date ▼ 1100.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Randall P. Cutri, DMD		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2006
Mailing Address 27 Western Ave.		<b>Transaction ID:</b> C6833426
City State Zip Code Hampden ME 04444	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 Dentist	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Mark Devine		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006
Mailing Address 200 Stevens Ave		<b>Transaction ID:</b> C6764233
City State Zip Code Portland ME 04102	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 n/a Occupation unemployed	Election Cycle-to-Date ▼ 500.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER: PAGE 8 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mark Devine</p> <p>Mailing Address 200 Stevens Ave</p> <p>City State Zip Code Portland ME 04102</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer n/a</p> <p>Occupation unemployed</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 04 / 2006</span></p> <p><b>Transaction ID:</b> C6772505</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Joanne Dunlap</p> <p>Mailing Address PO Box 946</p> <p>City State Zip Code Rangeley ME 04970-0946</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Information Requested</p> <p>Occupation Information Requested</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">300.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">07 / 25 / 2006</span></p> <p><b>Transaction ID:</b> C6776525</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">300.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas Hagan</p> <p>Mailing Address 47 Harvard Street B202</p> <p>City State Zip Code Charlestown MA 02129</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Actioneer, Inc</p> <p>Occupation Executive</p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 18 / 2006</span></p> <p><b>Transaction ID:</b> C6779441</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">800.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 9 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A.</b> Full Name (Last, First, Middle Initial) edward t harwood</p> <p>Mailing Address 245 log cabin road</p> <p>City <u>arundel</u> State <u>ME</u> Zip Code <u>04046</u></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <u>americare</u> Occupation <u>rn</u></p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">08 / 09 / 2006</span></p> <p><b>Transaction ID:</b> C6753063</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Susan L. Higgins</p> <p>Mailing Address PO Box 720</p> <p>City <u>Brownville</u> State <u>ME</u> Zip Code <u>04414</u></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <u>Information Requested</u> Occupation <u>Retired</u></p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 20 / 2006</span></p> <p><b>Transaction ID:</b> C6834272</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">500.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Jennifer J. Joaquin</p> <p>Mailing Address 20 Edwards St</p> <p>City <u>South Portland</u> State <u>ME</u> Zip Code <u>04106-4805</u></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer <u>Information Requested</u> Occupation <u>Information Requested</u></p> <p>Receipt For: 2006  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">250.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 16 / 2006</span></p> <p><b>Transaction ID:</b> C6834302</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">250.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1250.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></span>

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

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

FOR LINE NUMBER: PAGE 10 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<b>A.</b> Full Name (Last, First, Middle Initial) John Knutson Mailing Address HC 64 Box 2047 City State Zip Code Brooklin ME 04616 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 9 / 1 4 / 2 0 0 6</td> </tr> </table> </div> <b>Transaction ID:</b> C6834304 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M M / D D / Y Y Y Y	0 9 / 1 4 / 2 0 0 6
M M / D D / Y Y Y Y				
0 9 / 1 4 / 2 0 0 6				
Name of Employer Information Requested: Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px; float: right;">250.00</span>				

<b>B.</b> Full Name (Last, First, Middle Initial) Margaret H. Knutson Mailing Address 691 Bay Rd. City State Zip Code Brooklin ME 04616 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 9 / 0 4 / 2 0 0 6</td> </tr> </table> </div> <b>Transaction ID:</b> C6834305 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">250.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M M / D D / Y Y Y Y	0 9 / 0 4 / 2 0 0 6
M M / D D / Y Y Y Y				
0 9 / 0 4 / 2 0 0 6				
Name of Employer Information Requested: Occupation Retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px; float: right;">250.00</span>				

<b>C.</b> Full Name (Last, First, Middle Initial) John M. Lasell Mailing Address PO Box 111 City State Zip Code Franklin ME 04634-0111 FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Date of Receipt <div style="border: 1px solid black; padding: 2px;"> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 8 / 0 7 / 2 0 0 6</td> </tr> </table> </div> <b>Transaction ID:</b> C6834308 Amount of Each Receipt this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">200.00</div> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	M M / D D / Y Y Y Y	0 8 / 0 7 / 2 0 0 6
M M / D D / Y Y Y Y				
0 8 / 0 7 / 2 0 0 6				
Name of Employer unemployed: Occupation builder Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px; float: right;">900.00</span>				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<div style="border: 1px solid black; padding: 2px;">700.00</div>
<b>TOTAL</b> This Period (last page this line number only) .....	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Steven J Meyer</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 6	
Mailing Address 780 Boylston Street Apt. 14J		<b>Transaction ID: C6740572</b>	
City Boston State MA Zip Code 02199		Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Pragmatic C Software Corp. Occupation scientist			
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) <b>B. Steven J Meyer</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 6	
Mailing Address 780 Boylston Street Apt. 14J		<b>Transaction ID: C6825707</b>	
City Boston State MA Zip Code 02199		Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Pragmatic C Software Corp. Occupation scientist			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) <b>C. Tom M. Muradian</b>		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 6	
Mailing Address PO Box 8014		<b>Transaction ID: C6776921</b>	
City Winslow State ME Zip Code 04901-8014		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation Veteran's advocate			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 420.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	4300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 41
	<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)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A.</b> Tom M. Muradian		Date of Receipt M M / D D / Y Y Y Y 08 / 20 / 2006
Mailing Address PO Box 8014		Transaction ID: C6776922
City Winslow	State ME	Zip Code 04901-8014
Amount of Each Receipt this Period 20.00		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>
Name of Employer self	Occupation Veteran's advocate	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Tom M. Muradian		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address PO Box 8014		Transaction ID: C6776923
City Winslow	State ME	Zip Code 04901-8014
Amount of Each Receipt this Period 100.00		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>
Name of Employer self	Occupation Veteran's advocate	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Stephanie Nadeau		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006
Mailing Address P.O. Box 584		Transaction ID: C6764756
City Kennebunkport	State ME	Zip Code 04046
Amount of Each Receipt this Period 250.00		Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) <input type="checkbox"/>
Name of Employer S & M Fisheries	Occupation Lobster dealer	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	370.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<b>A.</b> Full Name (Last, First, Middle Initial) Kyle H Noble Mailing Address 56 Hills Beach Road City Biddeford State ME Zip Code 04005 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2006 <b>Transaction ID: C6824956</b> 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 Occupation Noble Housewrights Inc. general contractor Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Patricia M. O'Day-Senior Mailing Address 180 Shore Acres Rd City Parsonsfield State ME Zip Code 04047-6860 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 13 / 2006 <b>Transaction ID: C6776505</b> Amount of Each Receipt this Period 25.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation teacher MSAD 57 Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 235.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Theodore & Maria Pitas Mailing Address 3 Orchard Cir. City Westbrook State ME Zip Code 04092 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 27 / 2006 <b>Transaction ID: C6834342</b> Amount of Each Receipt this Period 300.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation American Carpentry Service Carpenter Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	<b>575.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 41
	<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)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Christopher Rheault</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 17 / 2006
Mailing Address 16 Cobbs Bridge Rd		<b>Transaction ID: C6764642</b>
City State Zip Code New Gloucester ME 04260	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation teacher	Election Cycle-to-Date ▼ 250.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Roger A. Roy</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2006
Mailing Address 19 Baird Rd		<b>Transaction ID: C6834355</b>
City State Zip Code Caribou ME 04736-3970	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer professor Occupation UMFK	Election Cycle-to-Date ▼ 400.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Jane Sanford</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2006
Mailing Address 57 High St		<b>Transaction ID: C6834361</b>
City State Zip Code Belfast ME 04915-6245	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer self Occupation retired	Election Cycle-to-Date ▼ 350.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A.</b> Full Name (Last, First, Middle Initial) Judith Sapp</p> <p>Mailing Address 111 West Street</p> <p>City State Zip Code Portland ME 04102</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Komondorok LLC Attorney</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">2750.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 03 / 2006</span></p> <p><b>Transaction ID:</b> C6772494</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>B.</b> Full Name (Last, First, Middle Initial) Patrick J. Scanlon</p> <p>Mailing Address 24 Washington Ave</p> <p>City State Zip Code Andover MA 01810-1724</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Scanlon associates consultant</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 14 / 2006</span></p> <p><b>Transaction ID:</b> C6777538</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<p><b>C.</b> Full Name (Last, First, Middle Initial) Patrick J. Scanlon</p> <p>Mailing Address 24 Washington Ave</p> <p>City State Zip Code Andover MA 01810-1724</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Scanlon associates consultant</p> <p>Receipt For: 2006 Election Cycle-to-Date ▼  <input type="checkbox"/> Primary   <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">09 / 26 / 2006</span></p> <p><b>Transaction ID:</b> C6834364</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
---	---

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">700.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

**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 / 41
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<b>A.</b> Full Name (Last, First, Middle Initial) Mark P. Senior Mailing Address 180 Shore Acres Rd City Parsonsfield State ME Zip Code 04047 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6779443 Amount of Each Receipt this Period <table border="1"> <tr> <td>150.00</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	0	9		1	8		2	0	0	6	150.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	8		2	0	0	6														
150.00																							
Name of Employer self Occupation orchardist Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>660.00</td> </tr> </table>	660.00																				
660.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Martha Spiess Mailing Address 7 Tidal Brook Road City Freeport State ME Zip Code 04032 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6776537 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</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	0	8		1	9		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	9		2	0	0	6														
500.00																							
Name of Employer self Occupation Information Requested Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>500.00</td> </tr> </table>	500.00																				
500.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Judith Steinhauer Mailing Address 138 Neal Street Portland ME 0410 City Portland State ME Zip Code 04102 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6777482 Amount of Each Receipt this Period <table border="1"> <tr> <td>500.00</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	0	9		1	3		2	0	0	6	500.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	3		2	0	0	6														
500.00																							
Name of Employer N/A Occupation N/A Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>800.00</td> </tr> </table>	800.00																				
800.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1150.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 17 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

**A.** Full Name (Last, First, Middle Initial)  
Jeremy Strater  
Mailing Address 202 Taft Point Rd.  
City Gouldsboro State ME Zip Code 04607  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Retired  
Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 08 / 16 / 2006  
Transaction ID: C6834378  
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)  
Jeremy Strater  
Mailing Address 202 Taft Point Rd.  
City Gouldsboro State ME Zip Code 04607  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Retired  
Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 09 / 08 / 2006  
Transaction ID: C6834377  
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)  
Jeremy Strater  
Mailing Address 202 Taft Point Rd.  
City Gouldsboro State ME Zip Code 04607  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Retired  
Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00  
Date of Receipt 09 / 25 / 2006  
Transaction ID: C6834376  
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) ..... ▶ 300.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 18 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. David A. Taylor</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2006	
Mailing Address 94 Atlantic Ave		<b>Transaction ID: C6826753</b>	
City State Zip Code Boothbay Harbor ME 04538		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation n/a retired			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Marc F. F. Wathen</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 18 / 2006	
Mailing Address 9 Myrtle St		<b>Transaction ID: C6837983</b>	
City State Zip Code Augusta ME 04330-4708		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Education&Manpower Bureau Teacher			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 354.00	

Full Name (Last, First, Middle Initial) <b>C. Marc F. F. Wathen</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2006	
Mailing Address 9 Myrtle St		<b>Transaction ID: C6763901</b>	
City State Zip Code Augusta ME 04330-4708		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Education&Manpower Bureau Teacher			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 354.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	545.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 41
	<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)  
Jean Hay Bright US

<b>A.</b> Full Name (Last, First, Middle Initial) Marc F. F. Wathen Mailing Address 9 Myrtle St City Augusta State ME Zip Code 04330-4708 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>9</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6779584 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</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	0	9		1	8		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	9		1	8		2	0	0	6														
25.00																							
Name of Employer Occupation Education&Manpower Bureau Teacher Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>354.00</td> </tr> </table>	354.00																				
354.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Carl B. Page Mailing Address 5214F Diamond Hts Blvd #731 City San Francisco State CA Zip Code 94131 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6837794A Amount of Each Receipt this Period <table border="1"> <tr> <td>199.00</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	0	8		3	0		2	0	0	6	199.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	0		2	0	0	6														
199.00																							
Name of Employer Occupation self computer engineer Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>398.00</td> </tr> </table>	398.00																				
398.00																							

\* Earmarked Contribution:  
See Below

<b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Mailing Address PO Box 382110 City Cambridge State MA Zip Code 02238-2110 FEC ID number of contributing federal political committee. <b>C</b>		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>0</td><td>8</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> <b>Transaction ID:</b> C6837794AB Amount of Each Receipt this Period <table border="1"> <tr> <td>199.00</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	0	8		3	0		2	0	0	6	199.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		3	0		2	0	0	6														
199.00																							
Name of Employer Occupation Conduit total: 1,859.86 Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<table border="1"> <tr> <td>.00</td> </tr> </table>	.00																				
.00																							

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>224.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 20 / 41  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

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

Mailing Address 111 West Street

City State Zip Code  
Portland ME 04102

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

Name of Employer Occupation  
Komondorok LLC Attorney

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

2750.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

**Transaction ID:** C6837804A

Amount of Each Receipt this Period  
1000.00

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

\* Earmarked Contribution:  
See Below

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

Mailing Address PO Box 382110

City State Zip Code  
Cambridge MA 02238-2110

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

Name of Employer Occupation  
Conduit total: 1,859.86

Receipt For: 2006 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	0	6

**Transaction ID:** C6837804AB

Amount of Each Receipt this Period  
1000.00

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

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	16064.00

**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 / 41
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A.</b> Androscoggin County Democratic Committee		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 6
Mailing Address 456 East Ave		<b>Transaction ID:</b> C6837981
City Lewiston	State ME	Amount of Each Receipt this Period 250.00
Zip Code 04240-4740		
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Maine Democratic Party		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 6
Mailing Address PO Box 5358		<b>Transaction ID:</b> C6834327
City Augusta	State ME	Amount of Each Receipt this Period 1000.00
Zip Code 04332-5358		
FEC ID number of contributing federal political committee. <b>C</b> C00179408		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1324.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1250.00

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

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

FOR LINE NUMBER: PAGE 22 / 41  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

**A.** Full Name (Last, First, Middle Initial)  
ImpeachPAC  
Mailing Address BOX 721066  
City JACKSON HEIGHTS State NY Zip Code 11372  
FEC ID number of contributing federal political committee. **C** C00416602  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 22 / 2006  
Transaction ID: C6832556  
Amount of Each Receipt this Period  
2900.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Mill to the Hill PAC  
Mailing Address 499 SOUTH CAPITOL ST SW SUITE 404  
City WASHINGTON State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C** C00410936  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 26 / 2006  
Transaction ID: C6834331  
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)  
National Committee for an Effective Congress  
Mailing Address 122 C St NW Ste 650  
City Washington State DC Zip Code 20001-2151  
FEC ID number of contributing federal political committee. **C** C00003558  
Name of Employer Occupation  
Receipt For: 2006  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006  
Transaction ID: C6778605  
Amount of Each Receipt this Period  
5000.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>8900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8900.00</b>

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

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

FOR LINE NUMBER: PAGE 23 / 41  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

A. Full Name (Last, First, Middle Initial)  
Jean M. Hay Bright

Mailing Address 4262 Kennebec Rd

City Dixmont State ME Zip Code 04932-3643

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

Name of Employer self Occupation farmer

Receipt For: 2006  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
15776.68

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 6

Transaction ID: C6837984

Amount of Each Receipt this Period  
506.00

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

\* In-Kind: Candidate's books given away

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	506.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	506.00





**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)

PAGE 26 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> D129077																					
<b>A. Farm Family insurance</b>		Date of Disbursement																					
Mailing Address 98 Main St Ste 1		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	0	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	9	/	0	2	/	2	0	0	6														
City Bucksport	State ME	Zip Code 04416-4026	Amount of Each Disbursement this Period																				
Purpose of Disbursement liability insurance		Category/ Type <b>001</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:                      District:																							

144.50

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> D129078																					
<b>B. Farm Family insurance</b>		Date of Disbursement																					
Mailing Address 98 Main St Ste 1		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	4	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	7	/	1	4	/	2	0	0	6														
City Bucksport	State ME	Zip Code 04416-4026	Amount of Each Disbursement this Period																				
Purpose of Disbursement volunteer rider on auto insurance		Category/ Type <b>001</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:                      District:																							

6.31

Full Name (Last, First, Middle Initial)		<b>Transaction ID:</b> D129111																					
<b>C. First Data</b>		Date of Disbursement																					
Mailing Address 6200 S Quebec St		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	1	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
0	7	/	1	1	/	2	0	0	6														
City Greenwood Village	State CO	Zip Code 80111-4729	Amount of Each Disbursement this Period																				
Purpose of Disbursement set up secure web site		Category/ Type <b>003</b>	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:                      District:																							

50.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>200.81</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

PAGE 28 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Betsy Garrold</b>		Transaction ID: D129071 Date of Disbursement 08 / 31 / 2006	
Mailing Address PO Box 309		Amount of Each Disbursement this Period 12.77	
City Brooks	State ME	Zip Code 04921	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  * in-kind received
Purpose of Disbursement telephone toll calls		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:			

Full Name (Last, First, Middle Initial) <b>B. Gossamer Press</b>		Transaction ID: D129056 Date of Disbursement 07 / 12 / 2006	
Mailing Address 259 Main St		Amount of Each Disbursement this Period 299.25	
City Old Town	State ME	Zip Code 04468-1530	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement 5000 calling cards		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:			

Full Name (Last, First, Middle Initial) <b>C. Gossamer Press</b>		Transaction ID: D129057 Date of Disbursement 08 / 18 / 2006	
Mailing Address 259 Main St		Amount of Each Disbursement this Period 399.00	
City Old Town	State ME	Zip Code 04468-1530	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Purpose of Disbursement 5000 cards, 1000 brochures		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:      District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	711.02
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 29 / 41

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Gossamer Press</b>		<b>Transaction ID:</b> D129058 Date of Disbursement 09 / 13 / 2006
Mailing Address 259 Main St		Amount of Each Disbursement this Period 177.45
City Old Town	State ME Zip Code 04468-1530	
Purpose of Disbursement 1000 envelopes, 500 pamphlets	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 006		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cash Contribution Hancock County Democ</b>		<b>Transaction ID:</b> D129119 Date of Disbursement 09 / 08 / 2006
Mailing Address 756 Bayside Rd		Amount of Each Disbursement this Period 50.00
City Ellsworth	State ME Zip Code 04605-3826	
Purpose of Disbursement Noel Stooky fundraiser	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 007		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hilton Garden Inn</b>		<b>Transaction ID:</b> D129072 Date of Disbursement 08 / 26 / 2006
Mailing Address 65 Commercial St		Amount of Each Disbursement this Period 11.00
City Portland	State ME Zip Code 04101	
Purpose of Disbursement parking	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type 002		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	238.45
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 30 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Hilton Garden Inn</b>		<b>Transaction ID: D129073</b>	
Mailing Address    65 Commercial St		Date of Disbursement 08 / 27 / 2006	
City Portland	State ME	Zip Code 04101	Amount of Each Disbursement this Period 41.58
Purpose of Disbursement parking, meal		002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                District:			

Full Name (Last, First, Middle Initial) <b>B. Jean M. Hay Bright</b>		<b>Transaction ID: D129069</b>	
Mailing Address    4262 Kennebec Rd		Date of Disbursement 08 / 29 / 2006	
City Dixmont	State ME	Zip Code 04932-3643	Amount of Each Disbursement this Period 1287.79
Purpose of Disbursement June travel		002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Jean M. Hay Bright			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: ME            District:			

Full Name (Last, First, Middle Initial) <b>C. Jean M. Hay Bright</b>		<b>Transaction ID: D129070</b>	
Mailing Address    4262 Kennebec Rd		Date of Disbursement 08 / 29 / 2006	
City Dixmont	State ME	Zip Code 04932-3643	Amount of Each Disbursement this Period 435.17
Purpose of Disbursement June travel		002 Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Candidate Name Jean M. Hay Bright			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:    2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: ME            District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1764.54</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

PAGE 32 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Maine Public Broadcasting Network</b>		<b>Transaction ID:</b> D129024 Date of Disbursement
Mailing Address    65 Texas Avenue		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2006"/>
City Bangor	State ME	Zip Code 04401
Purpose of Disbursement DVD		Amount of Each Disbursement this Period <input type="text" value="25.30"/>
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		Category/ Type <input type="text" value="007"/>
Disbursement For:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:    District:		

Full Name (Last, First, Middle Initial) <b>B. Marriott Sable Oaks</b>		<b>Transaction ID:</b> D129066 Date of Disbursement
Mailing Address    200 Sable Oaks Dr		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2006"/>
City South Portland	State ME	Zip Code 04106-3278
Purpose of Disbursement Lodging		Amount of Each Disbursement this Period <input type="text" value="277.13"/>
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		Category/ Type <input type="text" value="002"/>
Disbursement For:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:    District:		

Full Name (Last, First, Middle Initial) <b>C. Merrill Merchants Bank</b>		<b>Transaction ID:</b> D129113 Date of Disbursement
Mailing Address    201 Main St		<input type="text" value="07"/> / <input type="text" value="25"/> / <input type="text" value="2006"/>
City Bangor	State ME	Zip Code 04401-6402
Purpose of Disbursement new checks		Amount of Each Disbursement this Period <input type="text" value="31.60"/>
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		Category/ Type <input type="text" value="001"/>
Disbursement For:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:    District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="334.03"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 33 / 41

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Modern Postcard</b>		Transaction ID: D129029 Date of Disbursement 09 / 07 / 2006
Mailing Address 1675 Faraday Avenue		Amount of Each Disbursement this Period 2138.00
City Carlsbad State ME Zip Code 92008	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 006 Category/Type	
Purpose of Disbursement palm cards		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

Full Name (Last, First, Middle Initial) <b>B. Modern Screenprint</b>		Transaction ID: D129081 Date of Disbursement 09 / 22 / 2006
Mailing Address 69 Hillside Ave		Amount of Each Disbursement this Period 970.52
City Bangor State ME Zip Code 04401-3233	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 006 Category/Type	
Purpose of Disbursement 1,000 rainbow bumper stickers		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

Full Name (Last, First, Middle Initial) <b>C. Modern Screenprint</b>		Transaction ID: D129082 Date of Disbursement 08 / 08 / 2006
Mailing Address 69 Hillside Ave		Amount of Each Disbursement this Period 970.52
City Bangor State ME Zip Code 04401-3233	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 006 Category/Type	
Purpose of Disbursement 1,000 rainbow bumper stickers		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:
Candidate Name		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4079.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 34 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Modern Screenprint</b>		<b>Transaction ID:</b> D129083 Date of Disbursement 08 / 10 / 2006
Mailing Address 69 Hillside Ave		Amount of Each Disbursement this Period 606.90
City Bangor      State ME      Zip Code 04401-3233	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement 1,000 small stripes bumper stickers		006 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House      Disbursement For: 2006 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State:      District:	

Full Name (Last, First, Middle Initial) <b>B. National Committee for an Effective Congress</b>		<b>Transaction ID:</b> D126373 Date of Disbursement 09 / 15 / 2006
Mailing Address 122 C St NW Ste 650		Amount of Each Disbursement this Period 5000.00
City Washington      State DC      Zip Code 20001-2151	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Precinct Targeting		
Candidate Name		
Office Sought: <input type="checkbox"/> House      Disbursement For: 2006 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State:      District:	

Full Name (Last, First, Middle Initial) <b>C. Newtek Merchant Solutions</b>		<b>Transaction ID:</b> D129110 Date of Disbursement 07 / 03 / 2006
Mailing Address 744 N 4th St		Amount of Each Disbursement this Period 15.00
City Milwaukee      State WI      Zip Code 53203-2112	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement bank fees		003 Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House      Disbursement For: 2006 <input type="checkbox"/> Senate <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> President <input type="checkbox"/> Other (specify) ▼	State:      District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5621.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

PAGE 35 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Newtek Merchant Solutions</b>		Transaction ID: D129115 Date of Disbursement 08 / 04 / 2006	
Mailing Address    744 N 4th St		Amount of Each Disbursement this Period 15.00	
City Milwaukee	State WI	Zip Code 53203-2112	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement credit card fees		Category/ Type 003	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

Full Name (Last, First, Middle Initial) <b>B. NGP Software Inc.</b>		Transaction ID: D129022 Date of Disbursement 07 / 02 / 2006	
Mailing Address    1101 Vermont Ave Suite 710		Amount of Each Disbursement this Period 4994.00	
City Washington	State DC	Zip Code 20005	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement software		Category/ Type 001	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

Full Name (Last, First, Middle Initial) <b>C. Northeast Historic Films</b>		Transaction ID: D129026 Date of Disbursement 08 / 01 / 2006	
Mailing Address    85 Main St PO Box 185		Amount of Each Disbursement this Period 28.25	
City Bucksport	State ME	Zip Code 04416	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement DVD		Category/ Type 007	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5037.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER: (check only one)

PAGE 36 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. PC Signs.Com</b>		Transaction ID: D129025 Date of Disbursement 07 / 31 / 2006	
Mailing Address    2534 Commerce Blvd		Amount of Each Disbursement this Period 4615.76	
City Cincinatti	State OH	Zip Code 45241	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement lawn signs		Category/Type 006	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

Full Name (Last, First, Middle Initial) <b>B. Postmaster Dixmont</b>		Transaction ID: D129074 Date of Disbursement 07 / 03 / 2006	
Mailing Address    Western Ave		Amount of Each Disbursement this Period 23.50	
City Dixmont	State ME	Zip Code 04932	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement postage		Category/Type 001	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

Full Name (Last, First, Middle Initial) <b>C. Postmaster Dixmont</b>		Transaction ID: D129075 Date of Disbursement 07 / 14 / 2006	
Mailing Address    Western Ave		Amount of Each Disbursement this Period 4.55	
City Dixmont	State ME	Zip Code 04932	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <input type="checkbox"/>
Purpose of Disbursement postage		Category/Type 001	
Candidate Name		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State:    District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4643.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

PAGE 37 / 41

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Postmaster Dixmont</b>		Transaction ID: D129076 Date of Disbursement MM / DD / YYYY 08 / 18 / 2006	
Mailing Address Western Ave		Amount of Each Disbursement this Period 130.00	
City Dixmont State ME Zip Code 04932	Purpose of Disbursement postage Candidate Name	Category/Type 003 <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Postmaster Dixmont</b>		Transaction ID: D129079 Date of Disbursement MM / DD / YYYY 08 / 17 / 2006	
Mailing Address Western Ave		Amount of Each Disbursement this Period 19.50	
City Dixmont State ME Zip Code 04932	Purpose of Disbursement postage Candidate Name	Category/Type 001 <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. South Portland Auditorium</b>		Transaction ID: D129122 Date of Disbursement MM / DD / YYYY 09 / 25 / 2006	
Mailing Address 637 Highland Ave		Amount of Each Disbursement this Period 200.00	
City South Portland State ME Zip Code 04106-6425	Purpose of Disbursement facilities rental Candidate Name	Category/Type 007 <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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	349.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

PAGE 38 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1131 Union St</p> <p>City Bangor State ME Zip Code 04401-3012</p> <p>Purpose of Disbursement banners</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><b>Transaction ID:</b> D129114</p> <p>Date of Disbursement 07 / 21 / 2006</p> <p>Amount of Each Disbursement this Period 75.60</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>006 Category/Type</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
---	--	---

<p><b>B. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1131 Union St</p> <p>City Bangor State ME Zip Code 04401-3012</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><b>Transaction ID:</b> D129067</p> <p>Date of Disbursement 08 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 13.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>001 Category/Type</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
---	--	---

<p><b>C. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1131 Union St</p> <p>City Bangor State ME Zip Code 04401-3012</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><b>Transaction ID:</b> D129030</p> <p>Date of Disbursement 09 / 08 / 2006</p> <p>Amount of Each Disbursement this Period 161.28</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>001 Category/Type</p> <p>Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>
---	--	--

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>250.83</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p></p>

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

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

FOR LINE NUMBER: (check only one)

PAGE 39 / 41

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

<p><b>A. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1131 Union St</p> <p>City Bangor State ME Zip Code 04401-3012</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><b>Transaction ID:</b> D129031</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="129.63"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: <input type="text" value="001"/></p>		

<p><b>B. Staples</b></p> <p>Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 1131 Union St</p> <p>City Bangor State ME Zip Code 04401-3012</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><b>Transaction ID:</b> D129027</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="16.47"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: <input type="text" value="001"/></p>		

<p><b>C. The Vernon Company</b></p> <p>Full Name (Last, First, Middle Initial) The Vernon Company</p> <p>Mailing Address 1 Promotion Drive PO Box 600</p> <p>City Newton State IA Zip Code 50208-2065</p> <p>Purpose of Disbursement stickers</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><b>Transaction ID:</b> D129054</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="06"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="811.15"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>Disbursement For: 2006</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type: <input type="text" value="006"/></p>		

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="957.25"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

PAGE 40 / 41

17     18     19a     19b  
 20a     20b     20c     21

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Jim Trott</b>		Transaction ID: D129120 Date of Disbursement 09 / 17 / 2006	
Mailing Address    166 Murray St			
City Portland	State ME	Zip Code 04103-4210	
Purpose of Disbursement stakes		006 Category/ Type	
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:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                District:			

Full Name (Last, First, Middle Initial) <b>B. Twin Cities Air Service</b>		Transaction ID: D129068 Date of Disbursement 08 / 25 / 2006	
Mailing Address    81 Airport Dr			
City Auburn	State ME	Zip Code 04210-8996	
Purpose of Disbursement air fare		007 Category/ Type	
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:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                District:			

Full Name (Last, First, Middle Initial) <b>C. Unitel</b>		Transaction ID: D129059 Date of Disbursement 08 / 08 / 2006	
Mailing Address    129 Main St			
City Unity	State ME	Zip Code 04988-3731	
Purpose of Disbursement telephone service		001 Category/ Type	
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:    2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:                District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>1112.99</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

PAGE 41 / 41

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

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

NAME OF COMMITTEE (In Full)  
Jean Hay Bright US

Full Name (Last, First, Middle Initial) <b>A. Unitel</b>		Transaction ID: D129060 Date of Disbursement 08 / 25 / 2006
Mailing Address 129 Main St		Amount of Each Disbursement this Period 3.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Unity	State ME	
Zip Code 04988-3731		
Purpose of Disbursement telephone service Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 001		

Full Name (Last, First, Middle Initial) <b>B. Unitel</b>		Transaction ID: D129061 Date of Disbursement 09 / 12 / 2006
Mailing Address 129 Main St		Amount of Each Disbursement this Period 3.79 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Unity	State ME	
Zip Code 04988-3731		
Purpose of Disbursement telephone service Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 001		

Full Name (Last, First, Middle Initial) <b>C. BestWay Promotions (ButtonsRUs)</b>		Transaction ID: D129028 Date of Disbursement 08 / 21 / 2006
Mailing Address 200 Westgate Drive		Amount of Each Disbursement this Period 362.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Houston	State MN	
Zip Code 55943		
Purpose of Disbursement buttons Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type 006		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	369.58
<b>TOTAL</b> This Period (last page this line number only) .....	28863.65

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **JeanHayBright.US**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Hay Bright, Jean M. (from personal funds)	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4262 Kennebec Rd	

City Dixmont	State ME	ZIP Code 04932
-----------------	-------------	-------------------

Original Amount of Loan 2,500.00	Cumulative Payment To Date 500.00	Balance Outstanding at Close of This Period 2,000.00
-------------------------------------	--------------------------------------	---

**TERMS**

Date Incurred 06 / 30 / 2005	Date Due 11 / 30 / 2006	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------	----------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶ 2,000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶ [ ]
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **JeanHayBright.US**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Hay Bright, Jean M. (from personal funds)	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 4262 Kennebec Rd	

City Dixmont	State ME	ZIP Code 04932
-----------------	-------------	-------------------

Original Amount of Loan 2,500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 2,500.00
-------------------------------------	------------------------------------	---

**TERMS**

Date Incurred 09 / 30 / 2005	Date Due 11 / 30 / 2006	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------	----------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	2,500.00
<b>TOTALS</b> This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**JeanHayBright.US**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Hay Bright, Jean M. (from personal funds)

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

4262 Kennebec Rd

City

Dixmont

State

ME

ZIP Code

04932

Original Amount of Loan

6 5 8 . 2 1

Cumulative Payment To Date

0 . 0 0

Balance Outstanding at Close of This Period

6 5 8 . 2 1

**TERMS**

Date Incurred

0 1 / 3 1 / 2 0 0 6

Date Due

1 2 / 3 1 / 2 0 0 6

Interest Rate

none % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

6 5 8 . 2 1

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 4 OF 8  
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full) **JeanHayBright.US**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Hay Bright, Jean M. (from personal funds)**  
Election:  Primary  
 General  
 Other (specify) ▼

Mailing Address **4262 Kennebec Rd**  
City **Dixmont** State **ME** ZIP Code **04932**

Original Amount of Loan **1,790.10** Cumulative Payment To Date **0.00** Balance Outstanding at Close of This Period **1,790.10**

**TERMS** Date Incurred **02 / 28 / 2006** Date Due **12 / 31 / 2006** Interest Rate **none** % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)..... **1,790.10**

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**JeanHayBright.US**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Hay Bright, Jean M. (from personal funds)

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

4262 Kennebec Rd

City

Dixmont

State

ME

ZIP Code

04932

Original Amount of Loan

1,272.29

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1,272.29

**TERMS**

Date Incurred

03 / 30 / 2006

Date Due

12 / 31 / 2006

Interest Rate

none % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

1,272.29

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

FOR LINE NUMBER: (check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

**JeanHayBright.US**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Hay Bright, Jean M. (from personal funds)

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

4262 Kennebec Rd

City

Dixmont

State

ME

ZIP Code

04932

Original Amount of Loan

1,271.91

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1,271.91

**TERMS**

Date Incurred

04 / 06 / 2006

Date Due

12 / 31 / 2006

Interest Rate

none % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

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

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount Guaranteed Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

1,271.91

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

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

PAGE 7 OF 8  
FOR LINE NUMBER:  
(check only one)  13a  
 13b

NAME OF COMMITTEE (In Full) **JeanHayBright.US**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Hay Bright, Jean M. (from personal funds)**  
Election:  Primary  
 General  
 Other (specify) ▼

Mailing Address **4262 Kennebec Rd**  
City **Dixmont** State **ME** ZIP Code **04932**

Original Amount of Loan **1,516.85** Cumulative Payment To Date **0.00** Balance Outstanding at Close of This Period **1,516.85**

**TERMS** Date Incurred **05 / 06 / 2006** Date Due **12 / 31 / 2006** Interest Rate **none** % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional)..... **1,516.85**

**TOTALS** This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **JeanHayBright.US**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Hay Bright, Jean M. (from personal funds)</b>	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address <b>4262 Kennebec Rd</b>	

City <b>Dixmont</b>	State <b>ME</b>	ZIP Code <b>04932</b>
------------------------	--------------------	--------------------------

Original Amount of Loan <b>1,650.48</b>	Cumulative Payment To Date <b>0.00</b>	Balance Outstanding at Close of This Period <b>1,650.48</b>
--	---	--

**TERMS**

Date Incurred MM / DD / YYYY <b>06 / 30 / 2006</b>	Date Due MM / DD / YYYY <b>12 / 31 / 2006</b>	Interest Rate <b>none</b> % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
--	---	--------------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	<b>1,650.48</b>
<b>TOTALS</b> This Period (last page in this line only).....	<b>12,659.84</b>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.