

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than 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  
Progressive Patriots Fund

ADDRESS (number and street) PO Box 628008  
 Check if different than previously reported. (ACC)  
Middleton WI 53562

2. **FEC IDENTIFICATION NUMBER** C00409136  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 10 01 2007 through 10 31 2007

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

Type or Print Name of Treasurer Cole F Leystra-Assistant Treasurer

Signature of Treasurer Electronically Filed by Cole F Leystra-Assistant Treasurer Date 11 20 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Progressive Patriots Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%;"><tr><td align="right">58929.85</td></tr></table>	58929.85
Y	Y	Y	Y									
2	0	0	7									
58929.85												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td align="right">193273.62</td></tr></table>	193273.62	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
193273.62												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td align="right">212497.85</td></tr></table>	212497.85	<table border="1" style="width: 100%;"><tr><td align="right">1087963.30</td></tr></table>	1087963.30								
212497.85												
1087963.30												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td align="right">405771.47</td></tr></table>	405771.47	<table border="1" style="width: 100%;"><tr><td align="right">1146893.15</td></tr></table>	1146893.15								
405771.47												
1146893.15												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td align="right">95586.99</td></tr></table>	95586.99	<table border="1" style="width: 100%;"><tr><td align="right">836708.67</td></tr></table>	836708.67								
95586.99												
836708.67												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td align="right">310184.48</td></tr></table>	310184.48	<table border="1" style="width: 100%;"><tr><td align="right">310184.48</td></tr></table>	310184.48								
310184.48												
310184.48												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td align="right">0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>									
0.00												

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**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**

Write or Type Committee Name  
Progressive Patriots Fund

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	110135.52	520542.06
(i) Itemized (use Schedule A) .....	88407.89	544022.68
(ii) Unitemized .....	198543.41	1064564.74
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	13650.00	21150.00
(c) Other Political Committees (such as PACs) .....	212193.41	1085714.74
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	534.41
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	304.44	1714.15
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	212497.85	1087963.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	212497.85	1087963.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	74836.99	761843.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	74836.99	761843.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	20000.00	66000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	750.00	8365.00
(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 28(a), (b), and (c)) .....	750.00	8365.00
29. Other Disbursements.....	0.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	95586.99	836708.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	95586.99	836708.67

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	212193.41	1085714.74
34. Total Contribution Refunds (from Line 28(d)) .....	750.00	8365.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	211443.41	1077349.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	74836.99	761843.67
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	534.41
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	74836.99	761309.26

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Richard Abdo		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7
Mailing Address 1300 N. Prospect Ave Apt. 122		Transaction ID: SA11A1.105151
City State Zip Code Milwaukee WI 53202	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jessie Adams		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7
Mailing Address 518 Angelus St		Transaction ID: SA11A1.105155
City State Zip Code Santa Rosa CA 95403	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 215.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mohamed Ahmar		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 721 N. Crescent Dr.		Transaction ID: SA11A1.105173
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer International Computer Graphics Inc.	Occupation Founder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
O. John Alpizar

Mailing Address 1528 Palm Bay Road NE Suite A

City State Zip Code  
Palm Bay FL 32905

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

Name of Employer Occupation  
Alpizar Law, LLC Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

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

**Transaction ID:** SA11A1.105196

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1300 Dartmouth Road

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Self-Employed Attorney

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

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

**Transaction ID:** SA11A1.105225

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation  
None None

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 211.25

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

**Transaction ID:** SA11A1.105231

Amount of Each Receipt this Period  
1.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	751.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas Artle		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7
Mailing Address 594 Lucille Drive		<b>Transaction ID:</b> SA11A1.105242
City State Zip Code Incline Village NV 89451	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00
Name of Employer Self-Employed Occupation Consultant	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> Peter Arum		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7
Mailing Address 338 South Fremont Street, Apt 319		<b>Transaction ID:</b> SA11A1.105244
City State Zip Code San Mateo CA 94401	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00
Name of Employer National Education Association Occupation Project Coordinator	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> Gordon Asselstine		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address 4408 Country Club Rd.		<b>Transaction ID:</b> SA11A1.105247
City State Zip Code Edina MN 55424	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Lynne Banta

Mailing Address 1443 N Ave 49

City State Zip Code  
Los Angeles CA 90042

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

Name of Employer Occupation  
Alhambra Hospital RN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

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

Transaction ID: SA11A1.105274

Amount of Each Receipt this Period  
100.00

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

Mailing Address 71 Faculty Place

City State Zip Code  
Wilmington OH 45177

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.105299

Amount of Each Receipt this Period  
150.00

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

Mailing Address 6302 Bradley Pl

City State Zip Code  
Madison WI 53711

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

Name of Employer Occupation  
University of Wisconsin - Madison Policy and Planning Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

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

Transaction ID: SA11A1.105305

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	280.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 7 Riverwoods Dr. F125

City Exeter State NH Zip Code 03833

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11A1.105318

Amount of Each Receipt this Period  
300.00

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

Mailing Address 12 N Madrid Ave

City Newbury Park State CA Zip Code 91320

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.105325

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Irving Berlin

Mailing Address 2016 Sidney Ln NW

City Albuquerque State NM Zip Code 87107-1130

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

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

Transaction ID: SA11A1.105350

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Tobie Bernstein

Mailing Address 4809 Morgan Drive

City State Zip Code  
Chevy Chase MD 20815

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

Name of Employer Occupation  
ELI Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** SA11A1.105355

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3215 Lemon Street

City State Zip Code  
Riverside CA 92501

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

Name of Employer Occupation  
City of Riverside City Councilman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** SA11A1.105363

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Jean-Paul Bierny

Mailing Address 15 East Calle Conquista

City State Zip Code  
Tucson AZ 85716

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

Name of Employer Occupation  
Radiology Ltd. Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

**Transaction ID:** SA11A1.105375

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Renzo Biogeti

Mailing Address 301 E Ocean Blvd, Suite 640

City State Zip Code  
Long Beach CA 90802

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

Name of Employer Occupation  
Starfone CEO/President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: SA11A1.105381

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 8401 Newburgh Street

City State Zip Code  
Riverside CA 92508

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

Name of Employer Occupation  
Barnet/Silver Group Office Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.105383

Amount of Each Receipt this Period  
250.00

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

Mailing Address 41 Prospect Drive

City State Zip Code  
Yonkers NY 10705

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

Name of Employer Occupation  
Datacap Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.105400

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Andree Bouvier

Mailing Address 7743 Hillcrest Avenue

City Middleton State WI Zip Code 53562

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.105447

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Braem Foster

Mailing Address PO Box 215

City Cloverdale State CA Zip Code 95425

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

Name of Employer Williams & Lockner, Chartered Occupation Legal Assistant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.105463

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2143 Ridgemont Dr.

City Los Angeles State CA Zip Code 90046

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

Name of Employer Self-Employed Occupation Artist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

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

Transaction ID: SA11A1.105476

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
B. Kay Brilliant

Mailing Address 3817 Courtland Circle

City State Zip Code  
Alexandria VA 22305-2061

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

Name of Employer Occupation  
Virginia Education Association Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: SA11A1.105491

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1318 T. St NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
International Human Rights Law Group Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11A1.105500

Amount of Each Receipt this Period  
500.00

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

Mailing Address 570 Vincent Dr

City State Zip Code  
Athens GA 30607

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

Name of Employer Occupation  
University of Georgia Systems Administrator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: SA11A1.105504

Amount of Each Receipt this Period  
250.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Lawrence Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7	
Mailing Address 1517 Tyne Blvd		Transaction ID: SA11A1.105514	
City Nashville	State TN	Zip Code 37215	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ree Brown		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 359 N 75th St		Transaction ID: SA11A1.105516	
City Seattle	State WA	Zip Code 98103	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Craig Brownstein		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 1315 Wallach Place, NW		Transaction ID: SA11A1.105519	
City Washington	State DC	Zip Code 20009	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Edelman	Occupation Public Relations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Mary Brown Weiss

Mailing Address 1051 Port Malabar Blvd, NE, Ste 6

City State Zip Code  
Palm Beach FL 32905

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

Name of Employer Weiss & Newberry Medical Assoc  
Occupation Psychologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.104886

Amount of Each Receipt this Period  
.....2500.00

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Mary Brown Weiss

Mailing Address 1051 Port Malabar Blvd, NE, Ste 6

City State Zip Code  
Palm Beach FL 32905

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

Name of Employer Weiss & Newberry Medical Assoc  
Occupation Psychologist

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 10 / 2007

Transaction ID: SA11A1.108340

Amount of Each Receipt this Period  
.....-2500.00

Reattribute: to Gary Weiss

**C.** Full Name (Last, First, Middle Initial)  
Mr John Burchard

Mailing Address PO Box 11

City State Zip Code  
Webster WI 54893-0011

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

Name of Employer Best Efforts to Obtain Info  
Occupation Best Efforts to Obtain Info

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
.....250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 19 / 2007

Transaction ID: SA11A1.105538

Amount of Each Receipt this Period  
.....150.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	..... <b>-2350.00</b> .....
<b>TOTAL</b> This Period (last page this line number only) .....	▶	.....



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 17242 Henry St.

City State Zip Code  
Lansing IL 60438

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

Name of Employer Occupation  
University of Chicago Service Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

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

Transaction ID: SA11A1.105551

Amount of Each Receipt this Period  
60.00

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

Mailing Address 3005 NE 49th Street

City State Zip Code  
Vancouver WA 98663

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

Name of Employer Occupation  
Student Student

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.105554

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1201 16th Street NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation  
WEAC Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.105556

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1560.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Harry Caddow

Mailing Address PO Box 475673

City State Zip Code  
San Francisco CA 94147-5673

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.105561

Amount of Each Receipt this Period  
50.00

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

Mailing Address 401 S Detroit St Apt 204

City State Zip Code  
Los Angeles CA 90036

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

Name of Employer Self-Employed Occupation Actor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

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

Transaction ID: SA11A1.105577

Amount of Each Receipt this Period  
75.00

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

Mailing Address 900 N. Frederick Street

City State Zip Code  
Arlington VA 22205-1214

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.105588

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **375.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. John Cawley</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 975 Grove Street		<b>Transaction ID: SA11A1.105621</b>	
City State Zip Code San Francisco CA 94117	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Gourmet, Inc	Occupation Food Distributor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. John Cerny</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address N3643 Heights Dr		<b>Transaction ID: SA11A1.105623</b>	
City State Zip Code Bryant WI 54418	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Lena Public Schools	Occupation Guidance Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C. Irene Chang</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 2275 Mountain Dr.		<b>Transaction ID: SA11A1.105634</b>	
City State Zip Code Bartlesville OK 74003	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Hazem Chehabi, MD

Mailing Address 145 Irvine Cove Court

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Newport Diagnostic Center Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4500.00

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

Transaction ID: SA11A1.108350

Amount of Each Receipt this Period  
2000.00

In-kind - Event Expense:  
Catering

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

Mailing Address 145 Irvine Cove Court

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

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

Transaction ID: SA11A1.108352

Amount of Each Receipt this Period  
2500.00

In-kind - Event Expense:  
Catering

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

Mailing Address 130 Hardwood Ln

City Negaunee State MI Zip Code 49866

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

Name of Employer Self-Employed Occupation Electrical Contractor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.105666

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 21 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Jerry Clark</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 7
Mailing Address 1939 Calvert Street NW		<b>Transaction ID: SA11A1.105669</b>
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Clark Associates	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

Full Name (Last, First, Middle Initial) <b>B. Jerry Clark</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 1939 Calvert Street NW		<b>Transaction ID: SA11A1.105668</b>
City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Clark Associates	Occupation Consultant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C. Mary Alice Coan</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 803 N High Point Rd		<b>Transaction ID: SA11A1.105678</b>
City State Zip Code Madison WI 53717-2239	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Robert Cope

Mailing Address 644 Monroe Road

City Bath State NH Zip Code 03740

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

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

Transaction ID: SA11A1.105716

Amount of Each Receipt this Period  
25.00

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

Mailing Address 14118 81st Place NE

City Bothell State WA Zip Code 98011

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

Name of Employer DSHS Occupation Individual Provider

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

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

Transaction ID: SA11A1.105724

Amount of Each Receipt this Period  
30.00

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

Mailing Address 1314 Bitternut Ct

City Troy State MO Zip Code 63379

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

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

Transaction ID: SA11A1.105750

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	255.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) A. Janet Dade		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7
Mailing Address 4010 21st Street, NE		Transaction ID: SA11A1.105762
City Washington	State DC	Zip Code 20018
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer National Education Association	Occupation Director, Enterprise Technology Service	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Julie Ann Dakin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 14930 Sunrise Drive		Transaction ID: SA11A1.105769
City Bainbridge Island	State WA	Zip Code 98110
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. Henry Davis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 2569 Covered Bridge Rd.		Transaction ID: SA11A1.105788
City Merrick	State NY	Zip Code 11566-4815
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 575.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Lawrence Doppelt		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 185 Gristmill Ln.		<b>Transaction ID:</b> SA11A1.105860	
City State Zip Code Great Neck NY 11023		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Gleda Dreke		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address W1818 Lake Rd		<b>Transaction ID:</b> SA11A1.105870	
City State Zip Code Mukwonago WI 53149		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Riegel Law SC		Occupation Legal Secretary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Emmons Ellis		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7	
Mailing Address 14 Hillside Ave		<b>Transaction ID:</b> SA11A1.105928	
City State Zip Code Winchester MA 01890		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired		Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Ariel Emanuel</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 9 / 2 0 0 7
Mailing Address 9601 Wilshire Blvd 3rd Floor		<b>Transaction ID: SA11A1.105934</b>
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Endeavor Agency, LLC	Occupation Partner/Literary Trust	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Pat Engel</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 8807 Enfield Court #2		<b>Transaction ID: SA11A1.105942</b>
City State Zip Code Laurel MD 20708	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Columbia Services Group	Occupation Document Reviewer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Rodney Engelen</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 907 Lake Avenue		<b>Transaction ID: SA11A1.105943</b>
City State Zip Code Wilmette IL 60091	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Rodney Engelen

Mailing Address 907 Lake Avenue

City State Zip Code  
Wilmette IL 60091

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

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

Transaction ID: SA11A1.105944

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6507 Betsy Ross Place

City State Zip Code  
Wauwatosa WI 53213

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

Name of Employer Self-Employed Occupation Economist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.78

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

Transaction ID: SA11A1.105948

Amount of Each Receipt this Period  
17.76

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

Mailing Address 2820 East 4th Street

City State Zip Code  
Tucson AZ 85716

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

Name of Employer AZ Community Physicians Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.105949

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	367.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 27 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Hassan Essayli</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 25941 Rapid Falls Rd.		Transaction ID: SA11A1.105957
City State Zip Code Laguna Hills CA 92653	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer World of Denim, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. David Esselman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 1020 Meridian Ave		Transaction ID: SA11A1.105959
City State Zip Code South Pasadena CA 91030	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Southern California Housing Development	Occupation Board of Directors	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Dr. Salim Fadil, M.D.</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 3550 Lariat Lane		Transaction ID: SA11A1.105967
City State Zip Code Rolling Hills Estate CA 90274	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Kaiser Permanente	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Edward Farnilant</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 2350 E Elm St		<b>Transaction ID: SA11A1.105979</b>	
City State Zip Code Tucson AZ 85719	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Welcome Fawcett</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 1029 Spaight Street #5A		<b>Transaction ID: SA11A1.105986</b>	
City State Zip Code Madison WI 53703	Amount of Each Receipt this Period 1500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) <b>C. Irwin Field</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7	
Mailing Address 300 N Swall Dr #156		<b>Transaction ID: SA11A1.106011</b>	
City State Zip Code Beverly Hills CA 90211	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Liberty Vegetable Oil Co	Occupation Chairman		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Jeanette Foster</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 6205 Mineral Point, Apt. 324		Transaction ID: SA11A1.106048	
City Madison	State WI	Zip Code 53705	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B. Curtis Fowle</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 1611 Cold Spring Rd, Apt 224		Transaction ID: SA11A1.106050	
City Williamstown	State MA	Zip Code 01267-2776	Amount of Each Receipt this Period 115.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00		

Full Name (Last, First, Middle Initial) <b>C. Laura Fox</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 2023 El Cerrito Pl		Transaction ID: SA11A1.106052	
City Los Angeles	State CA	Zip Code 90068	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Physician		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1115.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Grey Frandsen

Mailing Address 28911 Booth Bay Rd.

City State Zip Code  
Temecula CA 92591

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

Name of Employer Occupation  
HGV, Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

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

Transaction ID: SA11A1.108354

Amount of Each Receipt this Period  
500.00

In-kind - Event Expense:  
Catering

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

Mailing Address 28911 Booth Bay Rd.

City State Zip Code  
Temecula CA 92591

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

Name of Employer Occupation  
HGV, Inc. Owner

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 3000.00

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

Transaction ID: SA11A1.106058

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 15635 Terraceview Court

City State Zip Code  
Riverside CA 92504

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

Name of Employer Occupation  
Riverside County Parks General Manager

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

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

Transaction ID: SA11A1.106060

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3250.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Renea Frederick</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address W8186 Highland Ave.		<b>Transaction ID: SA11A1.106071</b>	
City State Zip Code Merrill WI 54452		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation FM Enterprises Owner			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>B. Ned Gatzke</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 10498 Jancing Avenue		<b>Transaction ID: SA11A1.106132</b>	
City State Zip Code Sparta WI 54656		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) <b>C. Dina Ghosheh</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 3 Jencourt Ln.		<b>Transaction ID: SA11A1.106144</b>	
City State Zip Code Laguna Niguel CA 92677		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Advanced Eye Medical Office Staff			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Celia Gilbert</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 15 Gray Gardens West		<b>Transaction ID: SA11A1.106149</b>
City State Zip Code Cambridge MA 02138	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Occupation Self-Employed Poet	Aggregate Year-to-Date ▼ 1250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. John Goff</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 601 Greenbrier Drive		<b>Transaction ID: SA11A1.106184</b>
City State Zip Code Northport AL 35473	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed Occupation Self-Employed Psychologist	Aggregate Year-to-Date ▼ 600.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Mary Goodman</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 1454 S. Roxbury Dr.		<b>Transaction ID: SA11A1.106197</b>
City State Zip Code Los Angeles CA 90035	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Carol Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 126 3rd Ave North Apt 202		Transaction ID: SA11A1.106200
City Edmonds	State WA	Zip Code 98020
Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Susan Gordon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 0 7
Mailing Address 3 Cooper Morris Dr		Transaction ID: SA11A1.106202
City Pomona	State NY	Zip Code 10970
Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer New York Pain Management	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Richard Gorr		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 50 Glenbrook Rd. Apt. 15E		Transaction ID: SA11A1.106205
City Stamford	State CT	Zip Code 06902
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Renee Gray</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address 5500 41st Ave.		<b>Transaction ID: SA11A1.106224</b>	
City State Zip Code Kenosha WI 53144		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Naomi Greenberg</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 3408 Washington Ave		<b>Transaction ID: SA11A1.106234</b>	
City State Zip Code Baltimore MD 21244		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Not Employed Occupation Not Employed			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. Joyce Guard</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 909 Parkview Valley Dr.		<b>Transaction ID: SA11A1.106268</b>	
City State Zip Code Manchester MO 63011		Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	260.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Joyce Guard

Mailing Address 909 Parkview Valley Dr.

City Manchester State MO Zip Code 63011

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

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

Transaction ID: SA11A1.106269

Amount of Each Receipt this Period  
25.00

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

Mailing Address 26 White House Rd

City White Plains State NY Zip Code 10607

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

Name of Employer St. Vincent's Hospital Occupation Psychologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.106304

Amount of Each Receipt this Period  
25.00

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

Mailing Address 95 Forest Lane

City Berkeley State CA Zip Code 94708

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

Name of Employer American Nonsmokers Rights Foundation Occupation Policy Analyst

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106314

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Frances Harmon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 3714 Inwood		<b>Transaction ID:</b> SA11A1.106322
City State Zip Code Houston TX 77019	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Wilhelmina Hathaway		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7
Mailing Address 5630 Bedford Drive		<b>Transaction ID:</b> SA11A1.106343
City State Zip Code Riverside CA 92506-3403	Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 625.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffrey Hearn		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address P.O. Box 11285		<b>Transaction ID:</b> SA11A1.106357
City State Zip Code Takoma Park MD 20913	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Historian	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Jerry Henricks

Mailing Address 13013 Bridgeview Ct

City State Zip Code  
McCordsville IN 46055

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11A1.106376

Amount of Each Receipt this Period  
100.00

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

Mailing Address 5213 Bangor Drive

City State Zip Code  
Kensington MD 20895

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

Name of Employer National Education Association Occupation Executive Editor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106396

Amount of Each Receipt this Period  
250.00

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

Mailing Address 18616 N. 99th Ave #2027

City State Zip Code  
Sun City AZ 85373

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11A1.106425

Amount of Each Receipt this Period  
100.00

<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 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Israel Jacobs</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7	
Mailing Address 2455 Nott Street East # E		Transaction ID: SA11A1.106505	
City State Zip Code Schenectady NY 12309-4385	Amount of Each Receipt this Period 75.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self-Employed/General Electric	Occupation Physicist/Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>B. Dan Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 3652 Tamarack Ln		Transaction ID: SA11A1.106538	
City State Zip Code Eau Claire WI 54701	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. William Johnson</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 1512 New Pinery Rd, Box 72		Transaction ID: SA11A1.106550	
City State Zip Code Portage WI 53901	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Johnson Chiropractic Clinic	Occupation Chiropractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	625.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Ms Mary Johnston</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 7	
Mailing Address PO Box 128		<b>Transaction ID: SA11A1.106552</b>	
City State Zip Code Crestone CO 81131-0128		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Kevin Ketchum</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address N2951 East Rockdale Rd.		<b>Transaction ID: SA11A1.106619</b>	
City State Zip Code Cambridge WI 53523		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Fond du Lac Radiology Radiologist			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Jeanie Kilgour</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 6727 Woods Creek Dr.		<b>Transaction ID: SA11A1.106624</b>	
City State Zip Code Charlevoix MI 49720		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Richard Klass

Mailing Address 4025 38th Place N.

City Arlington State VA Zip Code 22207

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

Name of Employer: Klass International Network, Inc. Occupation: President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.106636

Amount of Each Receipt this Period  
 100.00

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

Mailing Address P.O. Box 80

City Taos State NM Zip Code 87571

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

Name of Employer: Self-Employed Occupation: Retailer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106667

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 10588 NE Byron Dr

City Bainbridge Island State WA Zip Code 98110

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

Name of Employer: Positive Futures Network Occupation: Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.106668

Amount of Each Receipt this Period  
 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 410 Reposado Drive

City State Zip Code  
La Habra Heights CA 90631

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.106672

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 9 Matt Hoxie Trail

City State Zip Code  
Plymouth MA 02360

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

Name of Employer Jordan Hospital Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106674

Amount of Each Receipt this Period  
50.00

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

Mailing Address 44 Morningside Drive, Apt 31

City State Zip Code  
New York NY 10025

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

Name of Employer Writer Occupation Self-Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.106687

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	6050.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Harry Kurani		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 2352 John St.		<b>Transaction ID:</b> SA11A1.106706
City State Zip Code Riverside CA 92503	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Magnolia Pool Supplies	Occupation Business Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Lester Kushner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 1 University Pl Apt 17A		<b>Transaction ID:</b> SA11A1.106710
City State Zip Code New York NY 10003-4569	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John Lamperti		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address Upper Loveland Road		<b>Transaction ID:</b> SA11A1.106727
City State Zip Code Norwich VT 05055	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 43 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Magali Larson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 511 Woodland Terrace		<b>Transaction ID: SA11A1.106749</b>	
City Philadelphia	State PA	Zip Code 19104	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Not Employed	Occupation Sociologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Terrence Lemberger</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7	
Mailing Address 7954 Coray Ln.		<b>Transaction ID: SA11A1.106775</b>	
City Verona	State WI	Zip Code 53593	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Dean Urgent Care	Occupation Doctor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Joanne Leonard</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7	
Mailing Address 483 Santa Monica		<b>Transaction ID: SA11A1.106779</b>	
City San Leandro	State CA	Zip Code 94579	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer West Masonry	Occupation Office Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Leon Letwin

Mailing Address 2226 Manning Avenue

City State Zip Code  
Los Angeles CA 90064-2002

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.106785

Amount of Each Receipt this Period  
100.00

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

Mailing Address 33 Addison Street

City State Zip Code  
Arlington MA 02476

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

Name of Employer IBM Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106789

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Mr Michael Levine

Mailing Address 5455 Arbor Ln

City State Zip Code  
Coral Gables FL 33156-3433

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106796

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 3652 22nd St

City San Francisco State CA Zip Code 94114

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

Name of Employer eBay Inc. Occupation Software Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

Transaction ID: SA11A1.106829

Amount of Each Receipt this Period  
100.00

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

Mailing Address 163 E 81st St., Apt. 9B

City New York State NY Zip Code 10028

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

Name of Employer Metropolitan Museum of Art Occupation Retired Designer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2007

Transaction ID: SA11A1.106857

Amount of Each Receipt this Period  
500.00

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

Mailing Address 7560 County Rd 12

City Savona State NY Zip Code 14879

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

Name of Employer Bradford Central School Occupation Educator

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

Transaction ID: SA11A1.106864

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Phyllis Machta

Mailing Address 6601 Brigadoon Dr

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106874

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5314 Broad Branch Road, NW

City State Zip Code  
Washington DC 20015

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

Name of Employer Madison & Company LLC Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106883

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5502 South Hill Drive

City State Zip Code  
Madison WI 53705

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

Name of Employer UW-Madison Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11A1.106885

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Jane Maher

Mailing Address 2129 Gateway St N

City Middleton State WI Zip Code 53562

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11A1.106891

Amount of Each Receipt this Period  
200.00

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

Mailing Address 31591 Bluff Drive

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Dana Investments Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

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

Transaction ID: SA11A1.106897

Amount of Each Receipt this Period  
5000.00

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

Mailing Address 9040 NE Juanita Dr

City Kirkland State WA Zip Code 98034

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

Name of Employer Self-Employed Occupation Consultant

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106916

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5450.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Howard Mattila

Mailing Address 1414 E Warnimont Ave Apt 10

City Milwaukee State WI Zip Code 53207

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.106947

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1629 Columbia Raod, NW, Apt 525

City Washington State DC Zip Code 20009

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

Name of Employer MoveOn.Org Occupation Washington Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.106951

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 14905 SE Rivershore Dr

City Vancouver State WA Zip Code 98683

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.106962

Amount of Each Receipt this Period  
250.00

<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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 127						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Veronica McClaskey</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 7	
Mailing Address 14905 SE Rivershore Dr		<b>Transaction ID: SA11A1.106963</b>	
City State Zip Code Vancouver WA 98683	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Margaret McCormick</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 5419 Harwood Road		<b>Transaction ID: SA11A1.106971</b>	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Education Association	Occupation Attorney		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. Mike McPherson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 1201 16th Street, NW		<b>Transaction ID: SA11A1.107003</b>	
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer National Education Association	Occupation CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Elizabeth Meiklejohn

Mailing Address 183 Silver St

City State Zip Code  
Granville MA 01034

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107013

Amount of Each Receipt this Period  
150.00

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

Mailing Address PO Box 1277

City State Zip Code  
Tiburon CA 94920

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.107014

Amount of Each Receipt this Period  
200.00

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

Mailing Address 728 Noyes Street #G1

City State Zip Code  
Evanston IL 60201

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

Name of Employer Occupation  
Northwestern University Librarian

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107041

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial) Philip Miles		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 0 7	
Mailing Address 609 Frederick Lane		Transaction ID: SA11A1.107047	
City State Zip Code Madison WI 53711	Amount of Each Receipt this Period 275.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

B. Full Name (Last, First, Middle Initial) Elaine Mitchell Attias		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 527 North Elm Dr		Transaction ID: SA11A1.107070	
City State Zip Code Beverly Hills CA 90210	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Writer/Journalist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

C. Full Name (Last, First, Middle Initial) Helen Moe		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 942 Sand Dollar Court		Transaction ID: SA11A1.107074	
City State Zip Code Fort Myers FL 33908	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Alfred Molier		Date of Receipt MM / DD / YYYY 10 / 22 / 2007
Mailing Address 203 Sanders Lane		<b>Transaction ID:</b> SA11A1.107078
City Lady Lake	State FL	Zip Code 32159
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 315.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Edith Monsees		Date of Receipt MM / DD / YYYY 10 / 23 / 2007
Mailing Address 7785 E Roseland Dr		<b>Transaction ID:</b> SA11A1.107085
City La Jolla	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jean Mooring		Date of Receipt MM / DD / YYYY 10 / 01 / 2007
Mailing Address 295 Abbotsford Ct.		<b>Transaction ID:</b> SA11A1.107099
City Glen Ellyn	State IL	Zip Code 60137
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00	
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Jean Mooring

Mailing Address 295 Abbotsford Ct.

City State Zip Code  
Glen Ellyn IL 60137

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11A1.107100

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Richard Morse

Mailing Address 2405 W 17th St

City State Zip Code  
Wilmington DE 19806

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

Name of Employer Occupation  
Young, Conaway, Stargatt & Taylor Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107112

Amount of Each Receipt this Period  
250.00

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

Mailing Address 25 Sunset Cir

City State Zip Code  
Sedona AZ 86336-5744

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

Name of Employer Occupation  
Self-Employed Bookseller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.107116

Amount of Each Receipt this Period  
100.00

<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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Stanford Myers		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 560 W 43rd St Apt 36D		<b>Transaction ID:</b> SA11A1.107140
City State Zip Code New York NY 10036-4318	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Donovan Data Systems	Occupation Computer Programmer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Rose Newman		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7
Mailing Address 1 Kendall Avenue # 3402		<b>Transaction ID:</b> SA11A1.107170
City State Zip Code Sleepy Hollow NY 10591-2210	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thang Nguyen		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 7
Mailing Address 5246 Dunleigh Drive		<b>Transaction ID:</b> SA11A1.107173
City State Zip Code Burke VA 22015	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer National Education Association	Occupation Information Security Program Coordinator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

A. Full Name (Last, First, Middle Initial) Frances Nyce		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 121 Smith Ave		Transaction ID: SA11A1.107200
City State Zip Code Westminster MD 21157	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Molly Oberbillig		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 5 / 2 0 0 7
Mailing Address 1907 Parkwood Dr SE		Transaction ID: SA11A1.107207
City State Zip Code Olympia WA 98501	Amount of Each Receipt this Period 180.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 335.00	

C. Full Name (Last, First, Middle Initial) Gerhard Oertel		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 330 Kensington Dr		Transaction ID: SA11A1.107219
City State Zip Code Madison WI 53704	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1330.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 56 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> John Olea, MD		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 5730 Willowtree Dr		Transaction ID: SA11A1.107226	
City Agoura Hills	State CA	Zip Code 91310	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Anesthesiologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Ryan Ozimek		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 7	
Mailing Address 1341 G St NW Suite 1100		Transaction ID: SA11A1.107255	
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer PICnet Inc	Occupation CEO - Web Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Eli Pariser		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 7	
Mailing Address 13 Greene Ave		Transaction ID: SA11A1.107271	
City Brooklyn	State NY	Zip Code 11238	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer MoveOn.org	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 112 Hidden Cove Ln

City State Zip Code  
Ponte Verde Beach FL 32082

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

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

Transaction ID: SA11A1.107290

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3007 Huldy Street

City State Zip Code  
Houston TX 77098

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

Name of Employer Occupation  
Danish Capital Region Psychiatrist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.107297

Amount of Each Receipt this Period  
200.00

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

Mailing Address 693 Hampton Woods Lane, S.W.

City State Zip Code  
Vero Beach FL 32962

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: SA11A1.107299

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>375.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 58 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Donald Pelz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 3470 Carpenter Rd. #211		Transaction ID: SA11A1.107302
City State Zip Code Ypsilanti MI 48197	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Donald Pelz		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7
Mailing Address 3470 Carpenter Rd. #211		Transaction ID: SA11A1.107301
City State Zip Code Ypsilanti MI 48197	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Susan Pennington		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 3509 County Road I		Transaction ID: SA11A1.107303
City State Zip Code Windsor CO 80550	Amount of Each Receipt this Period 19.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Platte River Power Authority	Occupation Buyer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 214.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	134.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Harry Phillips

Mailing Address 71 Hawthorne Way

City State Zip Code  
Hartsdale NY 10530

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

Name of Employer Occupation  
Winged Keel Group Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

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

Transaction ID: SA11A1.107339

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4119 Blaisdell Ave

City State Zip Code  
Minneapolis MN 55409

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

Name of Employer Occupation  
All Saints Lutheran Church Music Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.107348

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5105 Sealane Way

City State Zip Code  
Oxnard CA 93035

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

Name of Employer Occupation  
University of Wisconsin Retired Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.107354

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 3743 Brandywine St NW

City Washington State DC Zip Code 20016

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

Name of Employer Center for American Progress  
Occupation President, CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: SA11A1.107363

Amount of Each Receipt this Period  
250.00

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

Mailing Address 131 County Rd W

City River Falls State WI Zip Code 54022-5402

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

Name of Employer Wells Fargo  
Occupation Business Systems Consultant

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
356.56

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

Transaction ID: SA11A1.107371

Amount of Each Receipt this Period  
17.76

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

Mailing Address 1838 80th Ave.

City Dresser State WI Zip Code 54009

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

Name of Employer Retired  
Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11A1.107415

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	767.76
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Farshad Rastegar, PhD</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 0 / 2 0 0 7	
Mailing Address 10701 Wilshire Blvd, Apt 2103		<b>Transaction ID: SA11A1.107417</b>	
City State Zip Code Los Angeles CA 90024	Amount of Each Receipt this Period 1200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Relief International	Occupation CEO & President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00		

Full Name (Last, First, Middle Initial) <b>B. Mimi Renschner</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 4616 Independence Avenue		<b>Transaction ID: SA11A1.107438</b>	
City State Zip Code Riverdale NY 10471	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Marriage & Family Counselor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C. Kelly Roach</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7	
Mailing Address 562 Kendall Ave Apt 33		<b>Transaction ID: SA11A1.107476</b>	
City State Zip Code Palo Alto CA 94306	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Zenprise	Occupation Principal Software Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 127						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Sidney Robbins		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7	
Mailing Address 4208 Marina Court		<b>Transaction ID:</b> SA11A1.107478	
City State Zip Code Cortez FL 34215-2518	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Hanna Roth		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 7	
Mailing Address 285 County Route 2		<b>Transaction ID:</b> SA11A1.107526	
City State Zip Code Accord NY 12404	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Owner/Self	Occupation Business Coach/Writer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Marcia Rucker		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 7 / 2 0 0 7	
Mailing Address 5311 Tuscarawas Rd		<b>Transaction ID:</b> SA11A1.107542	
City State Zip Code Bethesda MD 20816	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Marya Ryan</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 7
Mailing Address 1 Buena Vista Court		Transaction ID: SA11A1.107551
City State Zip Code Urbana IL 61801-3130	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer University of Illinois	Occupation Administrator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mike Sanderson</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 640 N. San Antonio Rd.		Transaction ID: SA11A1.107568
City State Zip Code Los Altos CA 94022	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Best Efforts to Obtain In-fo	Occupation Best Efforts to Obtain Info	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Judith Sapp</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 111 West St		Transaction ID: SA11A1.107573
City State Zip Code Portland ME 04102	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Komondorok, LLC	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Kathleen Scanlan		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 525 Lane Place S		<b>Transaction ID:</b> SA11A1.107583
City State Zip Code Salem OR 97302	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Salem Radiology Consultants	Occupation Radiologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Connie Scharlau		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7
Mailing Address S1761 Lewis Valley Rd.		<b>Transaction ID:</b> SA11A1.107591
City State Zip Code Arcadia WI 54612	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ruth Schorer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 7
Mailing Address 68 Tamalpais Rd		<b>Transaction ID:</b> SA11A1.107617
City State Zip Code Berkeley CA 94708	Amount of Each Receipt this Period 45.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired Researcher	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	170.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 1984 East Loma Vista Drive

City State Zip Code  
Tempe AZ 85282

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11A1.107620

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1984 East Loma Vista Drive

City State Zip Code  
Tempe AZ 85282

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11A1.107619

Amount of Each Receipt this Period  
200.00

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

Mailing Address 7113 W Dove Ct

City State Zip Code  
Milwaukee WI 53223

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11A1.107629

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Debra Schwoch-Swoboda

Mailing Address N8822 Gladstone Beach Road

City State Zip Code  
Fond du Lac WI 54935

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

Name of Employer Occupation  
NEA Org. Specialist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107635

Amount of Each Receipt this Period  
250.00

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

Mailing Address 441 West 24th Street

City State Zip Code  
New York NY 10011

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: SA11A1.107637

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3408 Washington Ave

City State Zip Code  
Baltimore MD 21244-3607

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

Name of Employer Occupation  
Baltimore Theatre Alliance President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

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

Transaction ID: SA11A1.107686

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 67 / 127
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Donald Smart

Mailing Address 2744 Lakeview Dr.

City State Zip Code  
San Leandro CA 94577

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

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

Transaction ID: SA11A1.107728

Amount of Each Receipt this Period  
200.00

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

Mailing Address 240 E 10th St, #10A

City State Zip Code  
New York NY 10003

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

Name of Employer Google Inc Occupation Software Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.107732

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 439 Mariposa Avenue, Apt 1

City State Zip Code  
Sierra Madre CA 91024

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

Name of Employer Kotura Inc Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

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

Transaction ID: SA11A1.107735

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Yzetta Smith		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address Route 1 Box 470		Transaction ID: SA11A1.107750
City State Zip Code West Hamlin WV 25571	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retina Consultants, PLLC	Occupation Medical Transcriptionist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Viola Spalding		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 43641 Henson Road		Transaction ID: SA11A1.107771
City State Zip Code Hempstead TX 77445	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Gail Spencer		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 216 Burnett Avenue		Transaction ID: SA11A1.107781
City State Zip Code Lake Villa IL 60046	Amount of Each Receipt this Period 35.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	335.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 127
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A.</b> Pearl Staller		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 19 Count Rumford Lane		<b>Transaction ID:</b> SA11A1.107800
City State Zip Code Huntington NY 11743	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Howard Stein		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 3 / 2 0 0 7
Mailing Address 5000 South East End Ave.		<b>Transaction ID:</b> SA11A1.107818
City State Zip Code Chicago IL 60615	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Paul Steiner		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 3 / 2 0 0 7
Mailing Address 1117 Sugarbush Ln		<b>Transaction ID:</b> SA11A1.107821
City State Zip Code Waconia MN 55387	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Self-Employed	Occupation Builder	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Linda Stich

Mailing Address 3000 Lunada Lane

City Alamo State CA Zip Code 94507

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

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

Transaction ID: SA11A1.107839

Amount of Each Receipt this Period  
100.00

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

Mailing Address 5608 Chestnut Ln

City McFarland State WI Zip Code 53558

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

Name of Employer NEA Occupation Assistant Executive Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11A1.107849

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 10419 N. Mayberry Dr.,# 9

City Spokane State WA Zip Code 99218

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

Name of Employer Homemaker Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107855

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Dr. Art Strauss

Mailing Address 8 Blanchard St

City Irvine State CA Zip Code 92603

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

Name of Employer Self-Employed Occupation Physician

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

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

Transaction ID: SA11A1.107860

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr Donald Strong

Mailing Address 200 Carriage Hills Cir

City Martinez State GA Zip Code 30907-8228

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

Name of Employer Quality Health Care Services, Inc Occupation President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

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

Transaction ID: SA11A1.107866

Amount of Each Receipt this Period  
50.00

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

Mailing Address 57 Worth Street, Room A903

City New York State NY Zip Code 10013-2926

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

Name of Employer New York University Law School Occupation Law Professor

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

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

Transaction ID: SA11A1.107868

Amount of Each Receipt this Period  
2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Judi Svihla

Mailing Address 2412 Kenilworth Dr

City State Zip Code  
Elkhart IN 46514

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

Name of Employer Not Employed  
Occupation Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

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

Transaction ID: SA11A1.107878

Amount of Each Receipt this Period  
200.00

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

Mailing Address 3002 Finsel Court

City State Zip Code  
Olney MD 20832

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

Name of Employer NEA  
Occupation Federal Advocacy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

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

Transaction ID: SA11A1.107883

Amount of Each Receipt this Period  
250.00

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

Mailing Address 5516 Calhoun Ave

City State Zip Code  
Sherman Oaks CA 91401

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

Name of Employer Ace Entertainment  
Occupation Film Producer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

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

Transaction ID: SA11A1.107913

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Bouy Te

Mailing Address 4209 Roeburn Court

City State Zip Code  
Prince William VA 22192

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

Name of Employer NEA Occupation New Products and Programs

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107929

Amount of Each Receipt this Period  
250.00

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

Mailing Address 19 West 44th St, 16th Fl

City State Zip Code  
New York NY 10036-5902

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

Name of Employer Leon Tempelman & Son Occupation Senior Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.107938

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1600 N Oak St Apt 729

City State Zip Code  
Arlington VA 22209

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

Name of Employer National Endowment for the Arts Occupation Arts Administrator

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.107940

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Byron Thayer

Mailing Address 3528 Emerson Ave S

City State Zip Code  
Minneapolis MN 55408

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.107942

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4185 E Broken Rock Loop

City State Zip Code  
Flagstaff AZ 86004

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11A1.107947

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Howard Thompson, MD

Mailing Address 624 Miller Rd

City State Zip Code  
East Greenbush NY 12061

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.107954

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Tomas Torres

Mailing Address 13510 White Oak Landing

City State Zip Code  
Houston TX 77065

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

Name of Employer Corporate Staffing Occupation CPA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11A1.107981

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Elsie Van Buren

Mailing Address 144 Kimball Rd.

City State Zip Code  
Hancock NH 03449-6201

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

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

Transaction ID: SA11A1.108010

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dennis Van Roekel

Mailing Address 626 North Armistead Street

City State Zip Code  
Alexandria VA 22312-2925

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

Name of Employer National Education Association Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.108020

Amount of Each Receipt this Period  
250.00

<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 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Sally Venerable

Mailing Address 5000 SW 25th Blvd #1105

City Gainesville State FL Zip Code 32608

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

Transaction ID: SA11A1.108027

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 5543 N. Fresno Apt. D

City Fresno State CA Zip Code 93710

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

Name of Employer Retired Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

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

Transaction ID: SA11A1.108037

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1804 Conestoga Dr. SE

City Albuquerque State NM Zip Code 87123

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

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

Transaction ID: SA11A1.108046

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 1804 Conestoga Dr. SE

City State Zip Code  
Albuquerque NM 87123

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

Name of Employer Not Employed Occupation Not Employed

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

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

Transaction ID: SA11A1.108045

Amount of Each Receipt this Period  
10.00

**B.** Full Name (Last, First, Middle Initial)  
Gretchen von Gehren

Mailing Address 10503 Adel Rd

City State Zip Code  
Oakton VA 22124

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

Name of Employer Tigercomm, LLC Occupation Staff

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.108052

Amount of Each Receipt this Period  
250.00

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

Mailing Address 10800 Green Ash Lane

City State Zip Code  
Beltsville MD 20705-3833

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

Name of Employer NEA Government Relations Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.108071

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	510.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Scott Wasserman

Mailing Address 330 Central Park Ave

City State Zip Code  
Scarsdale NY 10583

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

Name of Employer Not Employed Occupation  
Computer Programmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.108090

Amount of Each Receipt this Period  
150.00

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

Mailing Address 2737 Woodlake Road

City State Zip Code  
Bowie MD 20721-2567

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

Name of Employer National Education Association Occupation  
Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.108101

Amount of Each Receipt this Period  
500.00

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

Mailing Address 130 La Fitte Street

City State Zip Code  
Mandeville LA 70448

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

Name of Employer Richmond Medical Clinic Occupation  
Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.108104

Amount of Each Receipt this Period  
50.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Rita Weinstein

Mailing Address 2203 Northwest 59th Street, Apt. 5

City State Zip Code  
Seattle WA 98107-3150

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

Name of Employer Self-Employed Occupation  
Self-Employed Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

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

Transaction ID: SA11A1.108114

Amount of Each Receipt this Period  
25.00

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

Mailing Address 2203 Northwest 59th Street, Apt. 5

City State Zip Code  
Seattle WA 98107-3150

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

Name of Employer Self-Employed Occupation  
Self-Employed Writer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

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

Transaction ID: SA11A1.108113

Amount of Each Receipt this Period  
25.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Gary Weiss, M.D.

Mailing Address 1051 Port Malabar Blvd NE #6

City State Zip Code  
Palm Bay FL 32905

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

Name of Employer Self-Employed Occupation  
Self-Employed Neurologist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3053.21

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

Transaction ID: SA11A1.108341

Amount of Each Receipt this Period  
2500.00

Reattribute: from Mary Brown Weiss

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2550.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Joyce Weissbach

Mailing Address 16922 Timberlakes Drive

City State Zip Code  
Ft. Myers FL 33908

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

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

Transaction ID: SA11A1.108121

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5036 Castleman St

City State Zip Code  
Pittsburgh PA 15232

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.108147

Amount of Each Receipt this Period  
500.00

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

Mailing Address 5007 Dunwoody Trail

City State Zip Code  
Raleigh NC 27606

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

Name of Employer NEA Occupation Executive Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

Transaction ID: SA11A1.108211

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 127
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Mike Wittenwyler

Mailing Address 2113 Chamberlain Ave

City Madison State WI Zip Code 53726-3969

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

Name of Employer LaFollette, Godfrey and Kahn Occupation Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

Transaction ID: SA11A1.108238

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4833 Sheboygan Ave #135

City Madison State WI Zip Code 53705

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

Name of Employer The Dardanelles Restaurant Occupation Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: SA11A1.108261

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Yedor

Mailing Address 1622 Sierra Alta Dr.

City Santa Ana State CA Zip Code 92705

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

Name of Employer Self-Employed Occupation Salesman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

Transaction ID: SA11A1.108279

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 82 / 127	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

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

Mailing Address 7105 W Deserama Dr

City State Zip Code  
Tucson AZ 85743-1210

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

Name of Employer Occupation  
Retired Retired

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

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

Transaction ID: SA11A1.108297

Amount of Each Receipt this Period  
75.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	110135.52

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

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

FOR LINE NUMBER: PAGE 83 / 127  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
AFL-CIO Committee On Political Education

Mailing Address 815 Sixteenth Street, NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00003806

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

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

**Transaction ID:** SA11C.105165

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1625 L Street NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

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

**Transaction ID:** SA11C.105167

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Association of Trial Lawyers Of America (ATLA PAC)

Mailing Address 1050 31st Street N.W.

City State Zip Code  
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00024521

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

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

**Transaction ID:** SA11C.105249

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **8500.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 84 / 127
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

**A.** Full Name (Last, First, Middle Initial)  
Machinists Non-Partisan Political League

Mailing Address 9000 Machinists Place

City State Zip Code  
Upper Marlboro MD 20772-2687

FEC ID number of contributing federal political committee. **C** C00002469

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	9	/	2	0	0	7

Transaction ID: SA11C.106873

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	13500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 85 / 127	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Progressive Patriots Fund
----------------------------------------------------------

A. Full Name (Last, First, Middle Initial) Park Bank	
Mailing Address 1801 Greenway Cross	
City Madison	State WI
Zip Code 53708	
FEC ID number of contributing federal political committee.	C
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1544.16

Date of Receipt MM / DD / YYYY 10 / 31 / 2007
Transaction ID: SA17.108356
Amount of Each Receipt this Period 304.44
Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	304.44
<b>TOTAL</b> This Period (last page this line number only) .....	▶	304.44

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. American Express</b>		<b>Transaction ID:</b> SB21B.105034	
Mailing Address 200 Vesey Street		Date of Disbursement 10 / 03 / 2007	
City New York	State NY	Zip Code 10285	Amount of Each Disbursement this Period 5.95
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. American Express</b>		<b>Transaction ID:</b> SB21B.105035	
Mailing Address 200 Vesey Street		Date of Disbursement 10 / 09 / 2007	
City New York	State NY	Zip Code 10285	Amount of Each Disbursement this Period 51.14
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Bobby Van's Grill</b>		<b>Transaction ID:</b> SB21B.105040	
Mailing Address 1201 New York Avenue, NW		Date of Disbursement 10 / 16 / 2007	
City Washington	State DC	Zip Code 20005	Amount of Each Disbursement this Period 2343.25
Purpose of Disbursement Event Expense: Catering		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2400.34</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<b>A. Centurymtel</b> Full Name (Last, First, Middle Initial) Mailing Address 100 CenturyTel Drive City Monroe State LA Zip Code 71203 Purpose of Disbursement Phone Expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.105043</b> Date of Disbursement 10 / 08 / 2007 Amount of Each Disbursement this Period 38.29 Category/Type
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------------------------------------------------------------------------------------------------------------------------------------------------

<b>B. Charter Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 2701 Daniels St City Madison State WI Zip Code 53718 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.105044</b> Date of Disbursement 10 / 31 / 2007 Amount of Each Disbursement this Period 25.54 Category/Type
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	----------------------------------------------------------------------------------------------------------------------------------------------------

<b>C. Hazem Chehabi, MD</b> Full Name (Last, First, Middle Initial) Mailing Address 145 Irvine Cove Court City Laguna Beach State CA Zip Code 92651 Purpose of Disbursement In-kind - Event Expense: Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB21B.108351</b> Date of Disbursement 10 / 07 / 2007 Amount of Each Disbursement this Period 2000.00 Category/Type
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	--	------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>2063.83</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Salma Chehabi</b>		<b>Transaction ID: SB21B.108353</b> Date of Disbursement 10 / 07 / 2007	
Mailing Address 145 Irvine Cove Court		Amount of Each Disbursement this Period 2500.00	
City Laguna Beach State CA Zip Code 92651	Purpose of Disbursement In-kind - Event Expense: Catering	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. Cole Leystra</b>		<b>Transaction ID: SB21B.105045</b> Date of Disbursement 10 / 04 / 2007	
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 813.59	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>C. Cole Leystra</b>		<b>Transaction ID: SB21B.105046</b> Date of Disbursement 10 / 18 / 2007	
Mailing Address 2898 Mickelson Pkwy, #204		Amount of Each Disbursement this Period 813.60	
City Fitchburg State WI Zip Code 53711	Purpose of Disbursement Payroll	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4127.19</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Comcast</b>		<b>Transaction ID:</b> SB21B.105047 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address PO Box 3005		Amount of Each Disbursement this Period 50.20
City Southeastern	State PA Zip Code 19398-3005	
Purpose of Disbursement Internet Service		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. David Kreisman</b>		<b>Transaction ID:</b> SB21B.105048 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 760.79
City Madison	State WI Zip Code 53703	
Purpose of Disbursement Payroll		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. David Kreisman</b>		<b>Transaction ID:</b> SB21B.105049 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 511 W Main St Apt 303		Amount of Each Disbursement this Period 760.80
City Madison	State WI Zip Code 53703	
Purpose of Disbursement Payroll		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1571.79
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Deer Park</b>		<b>Transaction ID:</b> SB21B.105050 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7
Mailing Address 215 6661 Dixie Hwy, Suite 4		Amount of Each Disbursement this Period 28.53
City Louisville State KY Zip Code 40258	Purpose of Disbursement Administrative Expense: Office Supplies Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.105051 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 0.91
City Washington State DC Zip Code 20001	Purpose of Disbursement Administrative Assessment Tax Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.105053 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 500 C St. NW Room 501		Amount of Each Disbursement this Period 12.33
City Washington State DC Zip Code 20001	Purpose of Disbursement Unemployment Tax Withheld Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	41.77
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.105052
Mailing Address 500 C St. NW Room 501		Date of Disbursement 10 / 18 / 2007
City Washington	State DC	Amount of Each Disbursement this Period 0.92
Zip Code 20001		
Purpose of Disbursement Administrative Assessment Tax		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Department of Employment Services</b>		<b>Transaction ID:</b> SB21B.105054
Mailing Address 500 C St. NW Room 501		Date of Disbursement 10 / 18 / 2007
City Washington	State DC	Amount of Each Disbursement this Period 12.34
Zip Code 20001		
Purpose of Disbursement Unemployment Tax Withheld		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Department of Workforce Development</b>		<b>Transaction ID:</b> SB21B.105055
Mailing Address 201 E. Washington Avenue		Date of Disbursement 10 / 04 / 2007
City Madison	State WI	Amount of Each Disbursement this Period 1.39
Zip Code 53702		
Purpose of Disbursement Unemployment Tax Withheld		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	14.65
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 92 / 127

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Department of Workforce Development</b>		<b>Transaction ID:</b> SB21B.105056 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 201 E. Washington Avenue		Amount of Each Disbursement this Period 1.15
City Madison State WI Zip Code 53702	Purpose of Disbursement Unemployment Tax Withheld	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Eamonn Collins</b>		<b>Transaction ID:</b> SB21B.105057 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 228 Alden Dr		Amount of Each Disbursement this Period 39.41
City Madison State WI Zip Code 53705	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Eamonn Collins</b>		<b>Transaction ID:</b> SB21B.105058 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 228 Alden Dr		Amount of Each Disbursement this Period 32.63
City Madison State WI Zip Code 53705	Purpose of Disbursement Payroll	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	73.19
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 93 / 127

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Emily Dreke</b>		<b>Transaction ID:</b> SB21B.105061 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 402.84
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Emily Dreke</b>		<b>Transaction ID:</b> SB21B.105062 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 711 13th Street NE		Amount of Each Disbursement this Period 402.86
City Washington State DC Zip Code 20002	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Grey Frandsen</b>		<b>Transaction ID:</b> SB21B.108355 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 7 / 2 0 0 7
Mailing Address 28911 Booth Bay Rd.		Amount of Each Disbursement this Period 500.00
City Temecula State CA Zip Code 92591	Category/ Type	
Purpose of Disbursement In-kind - Event Expense: Catering		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1305.70
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. George Aldrich</b>		<b>Transaction ID:</b> SB21B.105067 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.63
City Milwaukee State WI Zip Code 53208	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. George Aldrich</b>		<b>Transaction ID:</b> SB21B.105068 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 538 N 51st St		Amount of Each Disbursement this Period 1457.63
City Milwaukee State WI Zip Code 53208	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Gordon Flesch Co., Inc</b>		<b>Transaction ID:</b> SB21B.105070 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address PO Box 992		Amount of Each Disbursement this Period 83.33
City Madison State WI Zip Code 53701	Category/ Type	
Purpose of Disbursement Copier Rental		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2998.59
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Gordon Flesch Co., Inc</b>		<b>Transaction ID:</b> SB21B.105071 <b>Date of Disbursement</b> 10 / 15 / 2007
Mailing Address PO Box 992		Amount of Each Disbursement this Period 8.42
City Madison	State WI Zip Code 53701	
Purpose of Disbursement Copier Rental		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Greenway Office Center LLC</b>		<b>Transaction ID:</b> SB21B.105072 <b>Date of Disbursement</b> 10 / 01 / 2007
Mailing Address 8401 Greenway Blvd		Amount of Each Disbursement this Period 583.18
City Middleton	State WI Zip Code 53562	
Purpose of Disbursement Office Rent		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Landmark Building</b>		<b>Transaction ID:</b> SB21B.105080 <b>Date of Disbursement</b> 10 / 01 / 2007
Mailing Address 316 N Milwaukee St.		Amount of Each Disbursement this Period 250.00
City Milwaukee	State WI Zip Code 53202	
Purpose of Disbursement Office Rent		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	841.60
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Lenee Kruse</b>		<b>Transaction ID:</b> SB21B.105081 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 320 Constitution Ave NE Apt 14		Amount of Each Disbursement this Period 1165.01
City Washington State DC Zip Code 20002	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lenee Kruse</b>		<b>Transaction ID:</b> SB21B.105023 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 320 Constitution Ave NE Apt 14		Amount of Each Disbursement this Period 437.84
City Washington State DC Zip Code 20002	Purpose of Disbursement Reimbursement: See Memo Entries & Text Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. National Car Rental</b>		<b>Transaction ID:</b> SB21B.105023.1 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 7
Mailing Address 6929 North Lakewood Avenue, Suite		Amount of Each Disbursement this Period 268.34
City Tulsa State KS Zip Code 74117	Purpose of Disbursement Travel Expense: Car Rental Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1602.85
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Lenee Kruse</p>		<p><b>Transaction ID:</b> SB21B.105082 <b>Date of Disbursement</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	8		2	0	0	7														
<p>Mailing Address 320 Constitution Ave NE Apt 14</p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>1</td><td>1</td><td>6</td><td>5</td><td>.</td><td>0</td><td>1</td> </tr> </table> </p>		1	1	6	5	.	0	1													
1	1	6	5	.	0	1																	
<p>City Washington State DC Zip Code 20002</p>	<p>Purpose of Disbursement Payroll</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																						
<p>State: District:</p>																							

<p><b>B.</b> Full Name (Last, First, Middle Initial) M&amp;I Bank</p>		<p><b>Transaction ID:</b> SB21B.105018 <b>Date of Disbursement</b>  <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	1		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	1		2	0	0	7														
<p>Mailing Address 1 W Main</p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>5</td><td>9</td><td>.</td><td>9</td><td>7</td> </tr> </table> </p>		5	9	.	9	7															
5	9	.	9	7																			
<p>City Madison State WI Zip Code 53703</p>	<p>Purpose of Disbursement Credit Card Payment: See Memo Entry</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																						
<p>State: District:</p>																							

<p><b>C.</b> Full Name (Last, First, Middle Initial) Everyone.net</p>		<p><b>Transaction ID:</b> SB21B.105018.0 <b>Date of Disbursement</b>  <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>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> </p>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	8		1	5		2	0	0	7														
<p>Mailing Address 2635 North First Street, Suite 128</p>		<p>Amount of Each Disbursement this Period  <table border="1"> <tr> <td>5</td><td>9</td><td>.</td><td>9</td><td>7</td> </tr> </table> </p>		5	9	.	9	7															
5	9	.	9	7																			
<p>City San Jose State CA Zip Code 95134</p>	<p>Purpose of Disbursement Email Hosting</p>	<p>Category/ Type</p>																					
<p>Candidate Name</p>	<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President                  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>																						
<p>State: District:</p>																							

[MEMO ITEM]

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>1224.98</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. M&amp;I Bank</b>		<b>Transaction ID:</b> SB21B.105030 <b>Date of Disbursement</b> 10 / 29 / 2007
Mailing Address 1 W Main		Amount of Each Disbursement this Period 59.97
City Madison	State WI Zip Code 53703	
Purpose of Disbursement Credit Card Payment: See Memo Entry		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Everyone.net</b>		<b>Transaction ID:</b> SB21B.105030.0 <b>Date of Disbursement</b> 09 / 14 / 2007
Mailing Address 2635 North First Street, Suite 128		Amount of Each Disbursement this Period 59.97
City San Jose	State CA Zip Code 95134	
Purpose of Disbursement Email Hosting		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. M&amp;T Bank</b>		<b>Transaction ID:</b> SB21B.105084 <b>Date of Disbursement</b> 10 / 04 / 2007
Mailing Address 25 S Charles St		Amount of Each Disbursement this Period 27.88
City Baltimore	State MD Zip Code 21201	
Purpose of Disbursement Banking Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

87.85

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. M&amp;T Bank</b>		Transaction ID: SB21B.105085	
Mailing Address 25 S Charles St		Date of Disbursement 10 / 09 / 2007	
City Baltimore	State MD	Zip Code 21201	Amount of Each Disbursement this Period 15.85
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Mal Warwick and Associates</b>		Transaction ID: SB21B.105086	
Mailing Address 2550 Ninth Street, Suite 103		Date of Disbursement 10 / 29 / 2007	
City Berkeley	State CA	Zip Code 94710-2516	Amount of Each Disbursement this Period 14382.50
Purpose of Disbursement Direct Mail		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Merkle Response Services</b>		Transaction ID: SB21B.105087	
Mailing Address 13331 Pennsylvania Ave		Date of Disbursement 10 / 01 / 2007	
City Hagerstown	State MD	Zip Code 21742	Amount of Each Disbursement this Period 2148.29
Purpose of Disbursement Direct Mail Processing		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

16546.64

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

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Merkle Response Services</b>		<b>Transaction ID:</b> SB21B.105088
Mailing Address 13331 Pennsylvania Ave		Date of Disbursement 10 / 22 / 2007
City Hagerstown	State MD	Zip Code 21742
Purpose of Disbursement Direct Mail Processing	Amount of Each Disbursement this Period 950.31	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office of Tax and Revenue</b>		<b>Transaction ID:</b> SB21B.105091
Mailing Address 941 North Capitol Street, NE		Date of Disbursement 10 / 04 / 2007
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Income Tax Withheld	Amount of Each Disbursement this Period 93.50	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Office of Tax and Revenue</b>		<b>Transaction ID:</b> SB21B.105092
Mailing Address 941 North Capitol Street, NE		Date of Disbursement 10 / 18 / 2007
City Washington	State DC	Zip Code 20002
Purpose of Disbursement Income Tax Withheld	Amount of Each Disbursement this Period 93.50	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1137.31</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Park Bank</b>		<b>Transaction ID:</b> SB21B.105093	
Mailing Address 1801 Greenway Cross		Date of Disbursement 10 / 04 / 2007	
City Madison	State WI	Zip Code 53708	Amount of Each Disbursement this Period 2591.06
Purpose of Disbursement 941 Deposit		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Park Bank</b>		<b>Transaction ID:</b> SB21B.105095	
Mailing Address 1801 Greenway Cross		Date of Disbursement 10 / 04 / 2007	
City Madison	State WI	Zip Code 53708	Amount of Each Disbursement this Period 67.95
Purpose of Disbursement Banking Fee		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Park Bank</b>		<b>Transaction ID:</b> SB21B.105097	
Mailing Address 1801 Greenway Cross		Date of Disbursement 10 / 04 / 2007	
City Madison	State WI	Zip Code 53708	Amount of Each Disbursement this Period 0.89
Purpose of Disbursement Unemployment Tax Withheld		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2659.90</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A. Park Bank</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1801 Greenway Cross</p> <p>City Madison State WI Zip Code 53708</p> <p>Purpose of Disbursement Credit Card Payment: See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> SB21B.105008</p> <p><b>Date of Disbursement</b> 10 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 1019.18</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

<p><b>B. Staples</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address P.O. Box 469</p> <p>City Coppell State TX Zip Code 75019</p> <p>Purpose of Disbursement Administrative Expense: Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> SB21B.105008.1</p> <p><b>Date of Disbursement</b> 08 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 15.92</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		[MEMO ITEM]

<p><b>C. Comcast</b></p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 3005</p> <p>City Southeastern State PA Zip Code 19398-3005</p> <p>Purpose of Disbursement Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> SB21B.105008.2</p> <p><b>Date of Disbursement</b> 08 / 19 / 2007</p> <p>Amount of Each Disbursement this Period 25.01</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		[MEMO ITEM]

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1019.18</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: SB21B.105008.3 Date of Disbursement 08 / 26 / 2007
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 14.02
City Coppel	State TX Zip Code 75019	
Purpose of Disbursement Administrative Expense: Office Supplies		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Northwest Airlines</b>		Transaction ID: SB21B.105008.4 Date of Disbursement 09 / 09 / 2007
Mailing Address Department A4110, 2700 Lone Oak Pa		Amount of Each Disbursement this Period 229.20
City Eagan	State MN Zip Code 55121	
Purpose of Disbursement Travel Expense: Airfare		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Crowne Plaza</b>		Transaction ID: SB21B.105008.6 Date of Disbursement 09 / 10 / 2007
Mailing Address 13051 Bell Tower Dr		Amount of Each Disbursement this Period 530.32
City Fort Myers	State FL Zip Code 33907	
Purpose of Disbursement Travel Expense: Lodging		[MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	0.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Transaction ID: SB21B.105008.7 Date of Disbursement MM / DD / YYYY 09 / 13 / 2007
Mailing Address P.O. Box 469		Amount of Each Disbursement this Period 12.20  <b>[MEMO ITEM]</b>
City Coppel	State TX	
Zip Code 75019		
Purpose of Disbursement Administrative Expense: Office Supplies Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Park Bank</b>		Transaction ID: SB21B.105096 Date of Disbursement MM / DD / YYYY 10 / 10 / 2007
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 457.52
City Madison	State WI	
Zip Code 53708		
Purpose of Disbursement Banking Fee Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Park Bank</b>		Transaction ID: SB21B.105094 Date of Disbursement MM / DD / YYYY 10 / 18 / 2007
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 2589.96
City Madison	State WI	
Zip Code 53708		
Purpose of Disbursement 941 Deposit Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3047.48
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Park Bank</b>		<b>Transaction ID:</b> SB21B.105098 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 1801 Greenway Cross		Amount of Each Disbursement this Period 0.28
City Madison State WI Zip Code 53708	Purpose of Disbursement Unemployment Tax Withheld	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Paula Zellner</b>		<b>Transaction ID:</b> SB21B.105102 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 870.31
City Porterfield State WI Zip Code 54159	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Paula Zellner</b>		<b>Transaction ID:</b> SB21B.105103 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address W3034 Twin Creek Rd		Amount of Each Disbursement this Period 870.32
City Porterfield State WI Zip Code 54159	Purpose of Disbursement Payroll	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1740.91
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Pepco</b>		<b>Transaction ID:</b> SB21B.105104 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7	
Mailing Address 701 Ninth St., NW		Amount of Each Disbursement this Period 210.38	
City Washington State DC Zip Code 20068	Purpose of Disbursement Utilities Expense	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		<b>Transaction ID:</b> SB21B.105106 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 2.32	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Postmaster</b>		<b>Transaction ID:</b> SB21B.105107 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 16.04	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	228.74
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Transaction ID: SB21B.105108 Date of Disbursement 10 / 23 / 2007	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 205.00	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Postmaster</b>		Transaction ID: SB21B.105109 Date of Disbursement 10 / 31 / 2007	
Mailing Address 3902 Milwaukee Street		Amount of Each Disbursement this Period 465.00	
City Madison State WI Zip Code 53714	Purpose of Disbursement Administrative Expense: Postage	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Potomac Development, Corp</b>		Transaction ID: SB21B.105110 Date of Disbursement 10 / 01 / 2007	
Mailing Address 900 2nd St, NE Suite 114		Amount of Each Disbursement this Period 1548.62	
City Washington State DC Zip Code 20002	Purpose of Disbursement Office Rent	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2218.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Quickbooks Payroll Service</b>		<b>Transaction ID:</b> SB21B.105111 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 81.00
City Mountain View      State CA      Zip Code 94043		
Purpose of Disbursement Payroll Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>B. Quickbooks Payroll Service</b>		<b>Transaction ID:</b> SB21B.105112 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 7
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 19.50
City Mountain View      State CA      Zip Code 94043		
Purpose of Disbursement Payroll Processing Fee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

Full Name (Last, First, Middle Initial) <b>C. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.105114 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 5723.75
City Boston      State MA      Zip Code 02205-5183		
Purpose of Disbursement Telemarketing Fees		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:      District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5824.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.105115 <b>Date of Disbursement</b> 10 / 08 / 2007
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 1748.00
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Telemarketing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.105116 <b>Date of Disbursement</b> 10 / 15 / 2007
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 926.25
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Telemarketing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.105117 <b>Date of Disbursement</b> 10 / 22 / 2007
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 7785.25
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Telemarketing Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10459.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 110 / 127

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Sharegroup, Inc</b>		<b>Transaction ID:</b> SB21B.105118 Date of Disbursement 10 / 29 / 2007
Mailing Address PO Box 55183		Amount of Each Disbursement this Period 5956.50
City Boston State MA Zip Code 02205-5183	Purpose of Disbursement Telemarketing Fees Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. StreamGuys, Inc</b>		<b>Transaction ID:</b> SB21B.105122 Date of Disbursement 10 / 22 / 2007
Mailing Address PO Box 828		Amount of Each Disbursement this Period 290.00
City Arcata State CA Zip Code 95518	Purpose of Disbursement Online Video Hosting Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. TDS Telecom</b>		<b>Transaction ID:</b> SB21B.105123 Date of Disbursement 10 / 01 / 2007
Mailing Address PO Box 620070		Amount of Each Disbursement this Period 189.91
City Middleton State WI Zip Code 53562	Purpose of Disbursement Phone Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6436.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. TDS Telecom</b>		<b>Transaction ID:</b> SB21B.105124	
Mailing Address PO Box 620070		Date of Disbursement 10 / 22 / 2007	
City Middleton	State WI	Zip Code 53562	Amount of Each Disbursement this Period 165.00
Purpose of Disbursement Phone Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. TDS Telecom</b>		<b>Transaction ID:</b> SB21B.105125	
Mailing Address PO Box 620070		Date of Disbursement 10 / 29 / 2007	
City Middleton	State WI	Zip Code 53562	Amount of Each Disbursement this Period 190.16
Purpose of Disbursement Phone Expense		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Time Warner Cable</b>		<b>Transaction ID:</b> SB21B.105127	
Mailing Address PO Box 3237		Date of Disbursement 10 / 15 / 2007	
City Milwaukee	State WI	Zip Code 53201	Amount of Each Disbursement this Period 40.00
Purpose of Disbursement Internet Service		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>395.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.105128 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 7
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1161.89
City Muskego State WI Zip Code 53150	Purpose of Disbursement Payroll Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.105032 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 100.00
City Muskego State WI Zip Code 53150	Purpose of Disbursement Reimbursement: See Memo Entry Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cingular Wireless</b>		<b>Transaction ID:</b> SB21B.105032.0 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 7
Mailing Address 3604 S. Mooreland Road		Amount of Each Disbursement this Period 100.00
City New Berlin State WI Zip Code 53151	Purpose of Disbursement Cell Phone Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1261.89
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Trevor Miller</b>		<b>Transaction ID:</b> SB21B.105129 Date of Disbursement 10 / 18 / 2007
Mailing Address W205S8335 Pasadena Dr		Amount of Each Disbursement this Period 1161.89
City Muskego State WI Zip Code 53150	Category/ Type	
Purpose of Disbursement Payroll		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID:</b> SB21B.105130 Date of Disbursement 10 / 01 / 2007
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 124.86
City Baltimore State MD Zip Code 21297-0513	Category/ Type	
Purpose of Disbursement Phone Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID:</b> SB21B.105131 Date of Disbursement 10 / 08 / 2007
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 65.86
City Baltimore State MD Zip Code 21297-0513	Category/ Type	
Purpose of Disbursement Phone Expense		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1352.61
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		<b>Transaction ID:</b> SB21B.105132 <b>Date of Disbursement</b> 10 / 29 / 2007
Mailing Address PO Box 17577		Amount of Each Disbursement this Period 135.62
City Baltimore	State MD Zip Code 21297-0513	
Purpose of Disbursement Phone Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		<b>Transaction ID:</b> SB21B.105133 <b>Date of Disbursement</b> 10 / 01 / 2007
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 93.11
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement Cell Phone Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID:</b> SB21B.105134 <b>Date of Disbursement</b> 10 / 22 / 2007
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 84.93
City Baltimore	State MD Zip Code 21297	
Purpose of Disbursement Cell Phone Expense		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	313.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Voicetext Interactive</b>		<b>Transaction ID:</b> SB21B.105135 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 7
Mailing Address 211 East 7th Street, 12th Floor		Amount of Each Disbursement this Period 8.75
City Austin State TX Zip Code 78701	Purpose of Disbursement Conference Call Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Voicetext Interactive</b>		<b>Transaction ID:</b> SB21B.105136 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 7
Mailing Address 211 East 7th Street, 12th Floor		Amount of Each Disbursement this Period 13.72
City Austin State TX Zip Code 78701	Purpose of Disbursement Conference Call Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Voicetext Interactive</b>		<b>Transaction ID:</b> SB21B.105137 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 0 7
Mailing Address 211 East 7th Street, 12th Floor		Amount of Each Disbursement this Period 72.31
City Austin State TX Zip Code 78701	Purpose of Disbursement Conference Call Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	94.78
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Weber Printing Co.</b>		<b>Transaction ID:</b> SB21B.105138 Date of Disbursement 10 / 29 / 2007
Mailing Address 3048 North 34th St		Amount of Each Disbursement this Period 620.93
City Milwaukee State WI Zip Code 53210	Purpose of Disbursement Printing Expense: Letterhead Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Wisconsin Department of Revenue</b>		<b>Transaction ID:</b> SB21B.105140 Date of Disbursement 10 / 04 / 2007
Mailing Address PO Box 8902		Amount of Each Disbursement this Period 403.29
City Madison State WI Zip Code 53708	Purpose of Disbursement Income Tax Withheld Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Wisconsin Department of Revenue</b>		<b>Transaction ID:</b> SB21B.105141 Date of Disbursement 10 / 18 / 2007
Mailing Address PO Box 8902		Amount of Each Disbursement this Period 403.29
City Madison State WI Zip Code 53708	Purpose of Disbursement Income Tax Withheld Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1427.51
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial)

**A.** WPS Health Insurance

Mailing Address 1717 W. Broadway  
P.O. Box 8190

City Madison State WI Zip Code 53708

Purpose of Disbursement  
Insurance Premiums

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.105142

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

167.82

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

167.82

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

74686.70

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Arcuri for Congress</b>		<b>Transaction ID:</b> SB23.105036 <b>Date of Disbursement</b> 10 / 09 / 2007
Mailing Address PO Box 8508		Amount of Each Disbursement this Period 1000.00
City Utica	State NY	
Zip Code 13505		Category/ Type
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Michael Angelo Arcuri		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY District: 24		

Full Name (Last, First, Middle Initial) <b>B. Braley for Congress</b>		<b>Transaction ID:</b> SB23.105041 <b>Date of Disbursement</b> 10 / 09 / 2007
Mailing Address PO Box 390		Amount of Each Disbursement this Period 1000.00
City Waterloo	State IA	
Zip Code 50704		Category/ Type
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Bruce Braley		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA District: 01		

Full Name (Last, First, Middle Initial) <b>C. Carol Shea-Porter for Congress</b>		<b>Transaction ID:</b> SB23.105042 <b>Date of Disbursement</b> 10 / 09 / 2007
Mailing Address PO Box 453		Amount of Each Disbursement this Period 1000.00
City Manchester	State NH	
Zip Code 03866		Category/ Type
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Carol Shea-Porter		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A. Ellison for Congress</b></p> <p>Full Name (Last, First, Middle Initial) Ellison for Congress</p> <p>Mailing Address PO Box 11818</p> <p>City Minneapolis State MN Zip Code 55411</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Keith Maurice Ellison</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105060</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>B. Friends of Phil Hare</b></p> <p>Full Name (Last, First, Middle Initial) Friends of Phil Hare</p> <p>Mailing Address 313 17th Street PO Box 4183</p> <p>City Rock Island State IL Zip Code 61204</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Philip G Hare</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105066</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>C. Gillibrand for Congress</b></p> <p>Full Name (Last, First, Middle Initial) Gillibrand for Congress</p> <p>Mailing Address PO Box 1279</p> <p>City Hudson State NY Zip Code 12534</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Kirsten Gillibrand</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105069</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><b>3000.00</b></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

<p><b>A. Joe Courtney for Congress</b></p> <p>Full Name (Last, First, Middle Initial) Joe Courtney for Congress</p> <p>Mailing Address PO Box 1372</p> <p>City Vernon State CT Zip Code 06066</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Joseph D. Courtney</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105074</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>B. John Hall for Congress</b></p> <p>Full Name (Last, First, Middle Initial) John Hall for Congress</p> <p>Mailing Address PO Box 377</p> <p>City Dover Plains State NY Zip Code 12522</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name John Joseph Hall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105075</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>C. John Yarmuth for Congress</b></p> <p>Full Name (Last, First, Middle Initial) John Yarmuth for Congress</p> <p>Mailing Address 1815 Brownsboro Road, Suite 100</p> <p>City Louisville State KY Zip Code 40206</p> <p>Purpose of Disbursement Contribution to Federal Candidate</p> <p>Candidate Name Mr John A Yarmuth</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 03</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p><b>Transaction ID:</b> SB23.105077</p> <p>Date of Disbursement 10 / 09 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
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<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>3000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	



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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Kagen 4 Congress</b>		<b>Transaction ID:</b> SB23.105078 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 100 W College Ave		Amount of Each Disbursement this Period 1000.00
City Appleton State WI Zip Code 54911	Purpose of Disbursement Contribution to Federal Candidate Candidate Name Steven Leslie Kagen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Klein for Congress</b>		<b>Transaction ID:</b> SB23.105079 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 301 Yamato Road Suite 2198		Amount of Each Disbursement this Period 1000.00
City Boca Raton State FL Zip Code 33431	Purpose of Disbursement Contribution to Federal Candidate Candidate Name Ron Klein Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Loeb sack for Congress</b>		<b>Transaction ID:</b> SB23.105083 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 385 E College St		Amount of Each Disbursement this Period 1000.00
City Iowa City State IA Zip Code 52240	Purpose of Disbursement Contribution to Federal Candidate Candidate Name David Loeb sack Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 2 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Murphy for Congress</b>		<b>Transaction ID:</b> SB23.105090 <b>Date of Disbursement</b> 10 / 09 / 2007	
Mailing Address PO Box 127		Amount of Each Disbursement this Period 1000.00	
City Cheshire	State CT		Zip Code 06410
Purpose of Disbursement Contribution to Federal Candidate			Category/ Type
Candidate Name Christopher Scott Murphy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CT District: 05			

Full Name (Last, First, Middle Initial) <b>B. Patrick Murphy for Congress</b>		<b>Transaction ID:</b> SB23.105099 <b>Date of Disbursement</b> 10 / 09 / 2007	
Mailing Address PO Box 868		Amount of Each Disbursement this Period 1000.00	
City Levittown	State PA		Zip Code 19058
Purpose of Disbursement Contribution to Federal Candidate			Category/ Type
Candidate Name Patrick J. Murphy			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District: 08			

Full Name (Last, First, Middle Initial) <b>C. Paul Hodes for Congress</b>		<b>Transaction ID:</b> SB23.105101 <b>Date of Disbursement</b> 10 / 09 / 2007	
Mailing Address 26 South Main Street, #253		Amount of Each Disbursement this Period 1000.00	
City Concord	State NH		Zip Code 03301
Purpose of Disbursement Contribution to Federal Candidate			Category/ Type
Candidate Name Paul W Hodes			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NH District: 02			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Perlmutter for Congress</b>		<b>Transaction ID:</b> SB23.105105 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 2545 Youngfield Street		Amount of Each Disbursement this Period 1000.00
City Golden State CO Zip Code 80401	Purpose of Disbursement Contribution to Federal Candidate Candidate Name Edwin Perlmutter Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CO District: 07	
Category/Type		
Full Name (Last, First, Middle Initial) <b>B. Sestak for Congress</b>		

Full Name (Last, First, Middle Initial) <b>B. Sestak for Congress</b>		<b>Transaction ID:</b> SB23.105113 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address PO Box 16		Amount of Each Disbursement this Period 1000.00
City Media State PA Zip Code 19063	Purpose of Disbursement Contribution to Federal Candidate Candidate Name Joseph A Sestak, Jr Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 7	
Category/Type		
Full Name (Last, First, Middle Initial) <b>C. Steve Cohen for Congress</b>		

Full Name (Last, First, Middle Initial) <b>C. Steve Cohen for Congress</b>		<b>Transaction ID:</b> SB23.105121 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 7
Mailing Address 707 Adams Ave		Amount of Each Disbursement this Period 1000.00
City Memphis State TN Zip Code 38105	Purpose of Disbursement Contribution to Federal Candidate Candidate Name Mr Steve I Cohen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 09	
Category/Type		
Full Name (Last, First, Middle Initial) <b>SUBTOTAL of Disbursements This Page (optional)</b> ..... ▶		

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Tim Walz for US Congress</b>		<b>Transaction ID: SB23.105126</b>	
Mailing Address PO Box 938		Date of Disbursement 10 / 09 / 2007	
City Mankato	State MN	Zip Code 56002	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution to Federal Candidate		Category/ Type	
Candidate Name Timothy Walz			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN	District: 01		

Full Name (Last, First, Middle Initial) <b>B. Welch for Congress</b>		<b>Transaction ID: SB23.105139</b>	
Mailing Address PO Box 1086		Date of Disbursement 10 / 09 / 2007	
City Montpelier	State VT	Zip Code 05601	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution to Federal Candidate		Category/ Type	
Candidate Name Peter Welch			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: VT	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	20000.00

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Progressive Patriots Fund

Full Name (Last, First, Middle Initial) <b>A. Michael Forscey</b>		<b>Transaction ID: SB28A.105149</b>	
Mailing Address 3834 Harrison St., NW		Date of Disbursement 10 / 15 / 2007	
City Washington	State DC	Zip Code 20015	Amount of Each Disbursement this Period 250.00
Purpose of Disbursement Refund of Individual Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. David Goodfriend</b>		<b>Transaction ID: SB28A.105148</b>	
Mailing Address 7713 Oldchester Rd		Date of Disbursement 10 / 15 / 2007	
City Bethesda	State MD	Zip Code 20817	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Refund of Individual Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>750.00</b>

Image# 27931610126

Form/Schedule: **SB21B** All disbursements documented as Line 21b, Federal Operating Expenditures, are in support of the committee itself and did not serve as contributions to any other candidate, federal or non-federal.  
Transaction ID: **SB21B.105034**

Form/Schedule: **SB21B** This disbursement includes \$169.50 in unitemized expenses including \$3 for parking, \$6 for tolls, \$40 in taxi fare, and 120.50 to Doubletree Hotels for lodging.  
Transaction ID: **SB21B.105023**

\*\*\*\*\*

Image# 27931610127

Form/Schedule: **SB21B** This disbursement includes \$192.51 in unitemized disbursements including \$60 to Country Inn & Suites for lodging and \$132.51 to Dove Restaurant for food and beverage.  
Transaction ID: **SB21B.105008**

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