



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MODERATE DEMOCRATS PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		84035.04
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	236670.92									
(c) Total Receipts (from Line 19) .....	105300.00	369801.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	341970.92	453836.04								
7. Total Disbursements (from Line 31) .....	151616.79	263481.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	190354.13	190354.13								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
MODERATE DEMOCRATS PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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		
(i) Itemized (use Schedule A) .....	10500.00	27750.00
(ii) Unitemized .....	1600.00	1601.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12100.00	29351.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	93200.00	340450.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	105300.00	369801.00
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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)) .....	105300.00	369801.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	105300.00	369801.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	119116.79	186331.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	119116.79	186331.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32500.00	77150.00
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 .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
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))..	151616.79	263481.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	151616.79	263481.91

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	105300.00	369801.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	105300.00	369801.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	119116.79	186331.91
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	119116.79	186331.91

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32  
(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

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)  
MODERATE DEMOCRATS PAC

**A.**

Full Name (Last, First, Middle Initial)  
Kelly Bingel

Mailing Address 6035 N. 26th

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Mehlman Vogel Castagnetti Lobbyist

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
12 / 08 / 2009

**Transaction ID:** SA11AI.4727

Amount of Each Receipt this Period  
2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Shannon Finley

Mailing Address 2909 Cleveland Avenue, NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Capitol Counsel Principal

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** SA11AI.4807

Amount of Each Receipt this Period  
2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Frederick Graefe

Mailing Address 319 Constitution Avenue, NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2009

**Transaction ID:** SA11AI.4666

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 32  
(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)  
**MODERATE DEMOCRATS PAC**

**A.**

Full Name (Last, First, Middle Initial) Robert Hall, III		Date of Receipt <table border="1" style="font-size: small;"> <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>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	0		1	4		2	0	0	9													
Mailing Address 1010 Massachusetts AVenue, NW		<b>Transaction ID:</b> SA11AI.4711																				
City State Zip Code <b>Washington DC 20001</b>	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. <b>C</b>																						
Name of Employer Dutko Worldwide	Occupation Senior Vice President																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1100.00</td></tr></table>		1100.00																			
1100.00																						

**B.**

Full Name (Last, First, Middle Initial) Lawrence Larocco		Date of Receipt <table border="1" style="font-size: small;"> <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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	1		2	0	0	9													
Mailing Address 1350 I Street, NW Suite 510		<b>Transaction ID:</b> SA11AI.4698																				
City State Zip Code <b>Washington DC 20005</b>	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																						
FEC ID number of contributing federal political committee. <b>C</b>																						
Name of Employer Brownstein Hyatt Farber Schrec	Occupation Policy director																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1000.00</td></tr></table>		1000.00																			
1000.00																						

**C.**

Full Name (Last, First, Middle Initial) Mark Micali		Date of Receipt <table border="1" style="font-size: small;"> <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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8		1	1		2	0	0	9													
Mailing Address 3037 N. Quincy St.		<b>Transaction ID:</b> SA11AI.4681																				
City State Zip Code <b>Arlington VA 22207</b>	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>100.00</td></tr></table>		100.00																			
100.00																						
FEC ID number of contributing federal political committee. <b>C</b>																						
Name of Employer Total Spectrum	Occupation Vice President																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>1100.00</td></tr></table>		1100.00																			
1100.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>2100.00</td></tr></table>	2100.00
2100.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 32  
(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)  
**MODERATE DEMOCRATS PAC**

**A.**

Full Name (Last, First, Middle Initial) John Raffaelli		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>1</td><td>1</td><td>/</td><td>0</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	2	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	2	/	2	0	0	9													
Mailing Address 1401 K Street, NW Suite 1000		<b>Transaction ID:</b> SA11AI.4717																				
City Washington	State DC	Zip Code 20005																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>	2500.00																			
2500.00																						
Name of Employer Capitol Counsel, LLC	Occupation Gov't relations																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>2500.00</td></tr> </table>	2500.00																				
2500.00																						

**B.**

Full Name (Last, First, Middle Initial) Gregg Rothschild		Date of Receipt <table border="1" style="font-size: small;"> <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>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	0	9													
Mailing Address 6423 78th St.		<b>Transaction ID:</b> SA11AI.4729																				
City Cabin John	State MD	Zip Code 20818																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table>	500.00																			
500.00																						
Name of Employer Glover Park Group	Occupation Attorney																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>500.00</td></tr> </table>	500.00																				
500.00																						

**C.**

Full Name (Last, First, Middle Initial) Barbara Sutton		Date of Receipt <table border="1" style="font-size: small;"> <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>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	1	1	/	2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	1	1	/	2	0	0	9													
Mailing Address 4 Franklin St.		<b>Transaction ID:</b> SA11AI.4685																				
City Alexandria	State VA	Zip Code 22314																				
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																			
300.00																						
Name of Employer Cassidy and Associates	Occupation Gov't Relations																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>300.00</td></tr> </table>	300.00																				
300.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%;"><tr><td>3300.00</td></tr></table>	3300.00
3300.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%;"><tr><td>10500.00</td></tr></table>	10500.00
10500.00		



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 32

(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)  
MODERATE DEMOCRATS PAC

**A.**

Full Name (Last, First, Middle Initial)  
ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 1215 South Clark St.  
Suite 1510

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00250209

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  
08 / 11 / 2009

Transaction ID: SA11C.4691

Amount of Each Receipt this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
ALLIANT TECHSYSTEMS INC. EMPLOYEE CITIZENSHIP FUND

Mailing Address 1215 South Clark St.  
Suite 1510

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00250209

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  
12 / 29 / 2009

Transaction ID: SA11C.4735

Amount of Each Receipt this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA)

Mailing Address 1201 15th Street NW  
Suite 400

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00358663

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  
07 / 14 / 2009

Transaction ID: SA11C.4660

Amount of Each Receipt this Period

5000.00

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

10000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 32  
(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)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 1300 Morris Drive  
Suite 100

City State Zip Code  
Chesterbrook PA 19355

FEC ID number of contributing federal political committee. **C** C00400929

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  
1 1 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.4724

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street  
Room 7-A-50

City State Zip Code  
San Antonio TX 78205

FEC ID number of contributing federal political committee. **C** C00109017

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 / 1 3 / 2 0 0 9

**Transaction ID:** SA11C.4709

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
BABCOCK & WILCOX COMPANY POLITICAL ACTION COMMITTEE (B&W PAC), THE

Mailing Address 2016 Mt. Athos Road

City State Zip Code  
Lynchburg VA 24504

FEC ID number of contributing federal political committee. **C** C00365502

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  
0 7 / 2 9 / 2 0 0 9

**Transaction ID:** SA11C.4663

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12500.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 32
	<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)  
MODERATE DEMOCRATS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) BGR PAC	Date of Receipt
	Mailing Address 601 Thirteenth Street, NW Eleventh Floor South	<input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20005	<b>Transaction ID:</b> SA11C.4692
	FEC ID number of contributing federal political committee. <input type="text" value="C00359588"/>	Amount of Each Receipt this Period
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) BIOTECHNOLOGY INDUSTRY ORGANIZATION PAC (BIO PAC)	Date of Receipt
	Mailing Address 1201 Maryland Ave S. W. Suite 900 SUITE 400	<input type="text" value="08"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20024	<b>Transaction ID:</b> SA11C.4699
	FEC ID number of contributing federal political committee. <input type="text" value="C00355677"/>	Amount of Each Receipt this Period
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) BURLINGTON NORTHERN SANTA FE CORPORATION RAILPAC (BNSF RAILPAC)	Date of Receipt
	Mailing Address P.O. Box 961039 Suite 220	<input type="text" value="12"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Fort Worth State TX Zip Code 76161	<b>Transaction ID:</b> SA11C.4732
	FEC ID number of contributing federal political committee. <input type="text" value="C00235739"/>	Amount of Each Receipt this Period
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="9500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 32

(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)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
DIRECT VOICE THE POLITICAL ACTION COMMITTEE OF THE DIRECT MARKETING ASSOCIATION

Mailing Address 1615 L STREET NW  
SUITE 1100

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00235309

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  
1 0 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.4714

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
FEDERATION OF AMERICAN HOSPITALS PAC

Mailing Address 801 PENNSYLVANIA AVENUE  
SUITE 245

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00002261

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  
1 1 / 2 0 / 2 0 0 9

**Transaction ID:** SA11C.4723

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
FMR LLC POLITICAL ACTION COMMITTEE - FEDERAL (FIDELITY PAC)

Mailing Address 82 Devonshire Street  
N5A

City State Zip Code  
Boston MA 02109

FEC ID number of contributing federal political committee. **C** C00380550

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 / 1 3 / 2 0 0 9

**Transaction ID:** SA11C.4710

Amount of Each Receipt this Period  
5000.00

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

10000.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
HERCULES INCORPORATED VOLUNTARY POLITICAL ACTION COMMITTEE

Mailing Address 1313 North Market St

City State Zip Code  
Wilmington DE 19894

FEC ID number of contributing federal political committee. **C** C00402313

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

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

**Transaction ID:** SA11C.4706

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
ICE CREAM MILK & CHEESE PAC - INTERNATIONAL ICE CREAM ASSOCIATION MILK INDUSTRY

Mailing Address 1250 H Street NW Suite 900

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00128231

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  
 0 8 / 2 6 / 2 0 0 9

**Transaction ID:** SA11C.4702

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
J.P. MORGAN CHASE & CO. STATE AND FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 270 Park Avenue 21st Floor

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. **C** C00003830

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 1 / 0 9 / 2 0 0 9

**Transaction ID:** SA11C.4719

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5200.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 32  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
JPMORGAN CHASE & CO. PAC

Mailing Address 10 S. Dearborn St  
IL 1-0520

City State Zip Code  
Chicago IL 60603

FEC ID number of contributing federal political committee. **C** C00128512

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** SA11C.4737

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF PROFESSIONAL SURPLUS LINES OFFICES (NAPSLO) PAC

Mailing Address 805 15th Street, NW  
Suite 700

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00417634

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 21 / 2009

**Transaction ID:** SA11C.4704

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL COMMUNITY PHARMACISTS ASSOCIATION - PAC

Mailing Address 100 Daingerfield Road

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00030809

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2009

**Transaction ID:** SA11C.4694

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 12500.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 32  
(check only one)

11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
NORTEL POLITICAL ACTION COMMITTEE

Mailing Address 2325 Dulles Corner Blvd 10th Floor  
200 ATHENS WAY

City Herndon State VA Zip Code 20171

FEC ID number of contributing federal political committee. **C** C00167627

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 26 / 2009

Transaction ID: SA11C.4703

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I

Mailing Address 1301 K Street, NW  
Suite 800W

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
07 / 29 / 2009

Transaction ID: SA11C.4665

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
SECURITIES INDUSTRY AND FINANCIAL MARKETS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1425 K Street NW  
7th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00431312

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
11 / 09 / 2009

Transaction ID: SA11C.4720

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 32
	<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)  
MODERATE DEMOCRATS PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) SMITHKLINE BEECHAM CORPORATION POLITICAL ACTION COMMITTEE (GLAXOSMITHKLINE PAC)	Date of Receipt
	Mailing Address Five Moore Drive P.O. Box 13358	<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2009"/>
	City Res. Triangle Park State NC Zip Code 27709	<b>Transaction ID:</b> SA11C.4708
	FEC ID number of contributing federal political committee. <input type="text" value="C00199703"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="text"/> Aggregate Year-to-Date <input type="text" value="5000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) UBS AMERICAS FUND FOR BETTER GOVERNMENT	Date of Receipt
	Mailing Address C/O PER DYRVIK 400 ATLANTIC STREET	<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2009"/>
	City STAMFORD State CT Zip Code 06901	<b>Transaction ID:</b> SA11C.4715
	FEC ID number of contributing federal political committee. <input type="text" value="C00012245"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="text"/> Aggregate Year-to-Date <input type="text" value="5000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) UNITED HEALTH PAC	Date of Receipt
	Mailing Address 6214 WEDGEWOOD ROAD	<input type="text" value="11"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City BETHESDA State MD Zip Code 20817	<b>Transaction ID:</b> SA11C.4721
	FEC ID number of contributing federal political committee. <input type="text" value="C00321844"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="text"/> Aggregate Year-to-Date <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 32
	<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)  
MODERATE DEMOCRATS PAC

**A.** Full Name (Last, First, Middle Initial)  
VANGUARD GROUP COMMITTEE FOR RESPONSIBLE GOVERNMENT (VANGUARD COMMITTEE FOR RESPONSIBLE GOVERNMENT)

Date of Receipt:

Mailing Address 400 Devon Park Drive

City State Zip Code  
Wayne PA 19087

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Transaction ID: SA11C.4712

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
VERIZON COMMUNICATION INC. GOOD GOVT CLUB

Date of Receipt:

Mailing Address 1300 I St NW  
Ste 400 West

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Transaction ID: SA11C.4733

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
WYETH GOOD GOVERNMENT FUND

Date of Receipt:

Mailing Address Five Giralda Farms

City State Zip Code  
Madison NJ 07940

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼

Transaction ID: SA11C.4707

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="93200.00"/>

# 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)

PAGE 18 / 32

<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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) 20 South Catering	Transaction ID: SB21B.4775 Date of Disbursement
	Mailing Address 1156 Roundtop Farm	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Charlottesville State VA Zip Code 22902	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/meals	<input type="text" value="9217.21"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4740 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="07"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC fundraising consultant	<input type="text" value="10000.00"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4742 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/Meals	<input type="text" value="1672.00"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="20889.21"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 19 / 32

<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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4745 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="08"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/Travel	<input type="text" value="14445.58"/>
	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.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4752 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="09"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/Travel	<input type="text" value="10060.98"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4755 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/Travel	<input type="text" value="1000.00"/>
	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) .....	<input type="text" value="25506.56"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4773 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="10"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Fundraising consultant	<input type="text" value="10000.00"/>
	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.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4774 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="10"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/Travel	<input type="text" value="18165.46"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4781 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="11"/> <input type="text" value="12"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Fundraising consultant	<input type="text" value="10000.00"/>
	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) .....	<input type="text" value="38165.46"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4782 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="11"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Catering/meals	<input type="text" value="2084.73"/>
	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.	Full Name (Last, First, Middle Initial) Benchmark Strategies	Transaction ID: SB21B.4789 Date of Disbursement
	Mailing Address 426 C Street, NE	<input type="text" value="12"/> <input type="text" value="14"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Fundraising consultant	<input type="text" value="10000.00"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4738 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="07"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2028.44"/>
	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) .....	<input type="text" value="14113.17"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4744 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2000.88"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4749 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="2009"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2000.88"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4768 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="2009"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2001.76"/>
	Candidate Name	<input type="text"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="6003.52"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 23 / 32

<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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4777 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="10"/> <input type="text" value="27"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2053.52"/>
	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.	Full Name (Last, First, Middle Initial) Campaign Compliance, LLC	Transaction ID: SB21B.4787 Date of Disbursement
	Mailing Address 3242 Cummins Way	<input type="text" value="12"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Missoula State MT Zip Code 59802	Amount of Each Disbursement this Period
	Purpose of Disbursement Accounting fee	<input type="text" value="2001.32"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB21B.4741 Date of Disbursement
	Mailing Address 120 MARYLAND AVENUE NE	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Room Rental/Event Space	<input type="text" value="250.00"/>
	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) .....	<input type="text" value="4304.84"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB21B.4746 Date of Disbursement																			
	Mailing Address 120 MARYLAND AVENUE NE	<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>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	1		2	0	0	9												
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Room Rental/Event Space	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	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.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB21B.4779 Date of Disbursement																			
	Mailing Address 120 MARYLAND AVENUE NE	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	2		2	0	0	9												
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Room Rental/Event Space	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE	Transaction ID: SB21B.4790 Date of Disbursement																			
	Mailing Address 120 MARYLAND AVENUE NE	<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>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	9												
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period																			
	Purpose of Disbursement PAC Room Rental/Event Space	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	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) .....	<table border="1"><tr><td>750.00</td></tr></table>	750.00
750.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	



**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Honeywell	Transaction ID: SB21B.4791 Date of Disbursement 12 / 15 / 2009
	Mailing Address 101 Constitution Avenue, NW Suite 500 West	Amount of Each Disbursement this Period 220.00
	City Washington State DC Zip Code 20001	
	Purpose of Disbursement PAC Room Rental/Event Space	Category/ Type
	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.	Full Name (Last, First, Middle Initial) Innovative Merchant	Transaction ID: SB21B.4780 Date of Disbursement 11 / 03 / 2009
	Mailing Address 21215 Burbank Blvd., Suite 100	Amount of Each Disbursement this Period 39.95
	City Woodland Hills State CA Zip Code 91367	
	Purpose of Disbursement Credit card processing fee	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Innovative Merchant	Transaction ID: SB21B.4786 Date of Disbursement 12 / 03 / 2009
	Mailing Address 21215 Burbank Blvd., Suite 100	Amount of Each Disbursement this Period 39.95
	City Woodland Hills State CA Zip Code 91367	
	Purpose of Disbursement Credit card processing fee	Category/ Type
	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) .....	299.90
<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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Innovative Merchant	Transaction ID: SB21B.4788 Date of Disbursement
	Mailing Address 21215 Burbank Blvd., Suite 100	<input type="text" value="12"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Woodland Hills State CA Zip Code 91367	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="41.00"/>
	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.	Full Name (Last, First, Middle Initial) Innovative Merchant	Transaction ID: SB21B.4795 Date of Disbursement
	Mailing Address 21215 Burbank Blvd., Suite 100	<input type="text" value="12"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Woodland Hills State CA Zip Code 91367	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="8.20"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) L & A Tent Rentals, Inc.	Transaction ID: SB21B.4753 Date of Disbursement
	Mailing Address 114 Shady Cove Lane	<input type="text" value="09"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Stafford State VA Zip Code 22554	Amount of Each Disbursement this Period
	Purpose of Disbursement PAC Room Rental/Event Space	<input type="text" value="563.00"/>
	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) .....	<input type="text" value="612.20"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) Malachy Metcalfe	Transaction ID: SB21B.4769 Date of Disbursement 09 / 30 / 2009
	Mailing Address 110 Vincennes Road	Amount of Each Disbursement this Period 375.00
	City Charlottesville State VA Zip Code 22911	
	Purpose of Disbursement PAC Event expense	Category/ Type
	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.	Full Name (Last, First, Middle Initial) Malachy Metcalfe	Transaction ID: SB21B.4772 Date of Disbursement 10 / 05 / 2009
	Mailing Address 110 Vincennes Road	Amount of Each Disbursement this Period 150.00
	City Charlottesville State VA Zip Code 22911	
	Purpose of Disbursement PAC Event expense	Category/ Type
	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) ▼

C.	Full Name (Last, First, Middle Initial) Perkins Coie	Transaction ID: SB21B.4751 Date of Disbursement 09 / 04 / 2009
	Mailing Address 1201 Third Avenue	Amount of Each Disbursement this Period 500.00
	City Seattle State WA Zip Code 98101	
	Purpose of Disbursement Legal Fee	Category/ Type
	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) .....	▶	1025.00
<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 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)  
MODERATE DEMOCRATS PAC

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4778</p> <p>Date of Disbursement 10 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4783</p> <p>Date of Disbursement 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Perkins Coie</p> <p>Mailing Address 1201 Third Avenue</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Legal fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4806</p> <p>Date of Disbursement 12 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1500.00
<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

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)  
MODERATE DEMOCRATS PAC

A.

Full Name (Last, First, Middle Initial)  
Western Strategies, LLC

Mailing Address 150 Beverly Road

City Atlanta State GA Zip Code 30309

Purpose of Disbursement  
PAC Event Expense/Travel

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.4793

Date of Disbursement

12 / 15 / 2009

Amount of Each Disbursement this Period

5754.00

SUBTOTAL of Disbursements This Page (optional) .....

5754.00

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

118923.86

**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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) <b>BENNET FOR COLORADO</b>	<b>Transaction ID: SB23.4757</b>
	Mailing Address 1900 GRANT STREET SUITE 1170	Date of Disbursement 09 / 28 / 2009
	City DENVER State CO Zip Code 80203	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	
	Candidate Name <b>MICHAEL F BENNET</b>	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>CHARLIE MELANCON CAMPAIGN COMMITTEE INC</b>	<b>Transaction ID: SB23.4766</b>
	Mailing Address PO Box 549 PO BOX 549	Date of Disbursement 09 / 28 / 2009
	City Napoleonville State LA Zip Code 70390	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name <b>CHARLES MELANCON</b>	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>CITIZENS FOR ARLEN SPECTER</b>	<b>Transaction ID: SB23.4759</b>
	Mailing Address 236 MASSACHUSETTS AVENUE NE	Date of Disbursement 09 / 28 / 2009
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	
	Candidate Name <b>ARLEN SPECTER</b>	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>12500.00</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 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)  
MODERATE DEMOCRATS PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID	Transaction ID: SB23.4758 Date of Disbursement 09 / 28 / 2009
	Mailing Address P.O. BOX 19163	Amount of Each Disbursement this Period 5000.00
	City LAS VEGAS State NV Zip Code 89132	
	Purpose of Disbursement	Category/Type
	Candidate Name HARRY REID	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE	Transaction ID: SB23.4767 Date of Disbursement 09 / 29 / 2009
	Mailing Address 313 C STREET NE	Amount of Each Disbursement this Period 2500.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement	Category/Type
	Candidate Name KIRSTEN GILLIBRAND	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) GILLIBRAND FOR SENATE	Transaction ID: SB23.4805 Date of Disbursement 12 / 21 / 2009
	Mailing Address 313 C STREET NE	Amount of Each Disbursement this Period 2500.00
	City WASHINGTON State DC Zip Code 20002	
	Purpose of Disbursement	Category/Type
	Candidate Name KIRSTEN GILLIBRAND	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

10000.00

**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)  
MODERATE DEMOCRATS PAC

<b>A.</b> Full Name (Last, First, Middle Initial) NEVADA STATE DEMOCRATIC PARTY <hr/> Mailing Address 409 Horn Street <hr/> City Las Vegas State NV Zip Code 89107 <hr/> Purpose of Disbursement <input type="text"/> <input type="text"/> <hr/> Candidate Name <hr/> 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) ▼	Transaction ID: SB23.4800 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period <input type="text"/> 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) ROBIN CARNAHAN FOR SENATE <hr/> Mailing Address PO BOX 50378 <hr/> City ST LOUIS State MO Zip Code 63105 <hr/> Purpose of Disbursement <input type="text"/> <input type="text"/> <hr/> Candidate Name ROBIN CARNAHAN <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4802 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 9
	Amount of Each Disbursement this Period <input type="text"/> 5000.00

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

10000.00

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

32500.00