

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
SUSAN B ANTHONY LIST CANDIDATE FUND

ADDRESS (number and street) 1420 King Street
Suite 550
 Check if different than previously reported. (ACC)
Alexandria VA 22314

2. **FEC IDENTIFICATION NUMBER** C00332296
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 03 01 2006 through 03 31 2006

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

Type or Print Name of Treasurer Larry Ruggiero

Signature of Treasurer Electronically Filed by Larry Ruggiero Date 05 19 2006

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
SUSAN B ANTHONY LIST CANDIDATE FUND

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%;"><tr><td>143003.50</td></tr></table>	143003.50	<table border="1" style="width: 100%;"><tr><td>143003.50</td></tr></table>	143003.50
Y	Y	Y	Y									
2	0	0	6									
143003.50												
143003.50												
(b) Cash on Hand at Beginning of Reporting Period	<table border="1" style="width: 100%;"><tr><td>157046.18</td></tr></table>	157046.18										
157046.18												
(c) Total Receipts (from Line 19)	<table border="1" style="width: 100%;"><tr><td>35729.00</td></tr></table>	35729.00	<table border="1" style="width: 100%;"><tr><td>50236.69</td></tr></table>	50236.69								
35729.00												
50236.69												
(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>192775.18</td></tr></table>	192775.18	<table border="1" style="width: 100%;"><tr><td>193240.19</td></tr></table>	193240.19								
192775.18												
193240.19												
7. Total Disbursements (from Line 31)	<table border="1" style="width: 100%;"><tr><td>13937.51</td></tr></table>	13937.51	<table border="1" style="width: 100%;"><tr><td>14402.52</td></tr></table>	14402.52								
13937.51												
14402.52												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table border="1" style="width: 100%;"><tr><td>178837.67</td></tr></table>	178837.67	<table border="1" style="width: 100%;"><tr><td>178837.67</td></tr></table>	178837.67								
178837.67												
178837.67												
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
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
SUSAN B ANTHONY LIST CANDIDATE FUND

Report Covering the Period: From:

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	27198.00	30082.00
(i) Itemized (use Schedule A)	8531.00	20154.69
(ii) Unitemized	35729.00	50236.69
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35729.00	50236.69
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))	35729.00	50236.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35729.00	50236.69

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	3058.53	3484.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3058.53	3484.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10878.98	10917.94
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))..	13937.51	14402.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	13937.51	14402.52

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)	35729.00	50236.69
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35729.00	50236.69
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3058.53	3484.58
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3058.53	3484.58

**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 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Pirooz Abir		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006
Mailing Address 1199 Quarry Commons Dr		Transaction ID: 60380-45415896177292
City State Zip Code Yardley PA 19067-4021	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

B. Full Name (Last, First, Middle Initial) N. Adamson		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 2600 Barracks Road Apt. 289		Transaction ID: 89510-00835818052291
City State Zip Code Charlottesville VA 22901-2193	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

C. Full Name (Last, First, Middle Initial) Kelly Aguayo		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 4811 Stonewall Ave		Transaction ID: 60380-79339236021042
City State Zip Code Downers Grove IL 60515-3307	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional) ▶	75.00
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 7 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Joan Albers		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006
Mailing Address 911 Langdon Street		Transaction ID: 47295-82923525571823
City State Zip Code Alton IL 62002-3653	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Tri Lab Limited	Occupation Med. Technical	Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) B. Clara Allen		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006
Mailing Address 1128 Forest Avenue		Transaction ID: 89510-22320193052292
City State Zip Code Pasadena CA 91103-2806	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) C. Robert Allen		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006
Mailing Address 2451 Brickell Avenue Apt. 6J		Transaction ID: 47285-00661867856979
City State Zip Code Miami FL 33129-2419	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific-Atl Steamshia Com- pany	Occupation Seaman Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
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 8 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Richard Alvord		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006
Mailing Address 4939 Northeast Laurelcrest Lane		Transaction ID: 60985-09827822446823
City State Zip Code Seattle WA 98105-5244	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Self	Occupation Private Investor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

B. Full Name (Last, First, Middle Initial) Andrew Ansaldi		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 3615 192nd Street		Transaction ID: 17004-32120913267135
City State Zip Code Flushing NY 11358-2422	Amount of Each Receipt this Period 50.00	
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 ▼ 50.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Steven Apour		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 2640 Melendy Drive Apt. 3		Transaction ID: 16452-78620547056198
City State Zip Code San Carlos CA 94070-3661	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Page 44 Studios	Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	5060.00
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 9 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Minnie Arao		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 2258 Vista Grande Drive		Transaction ID: 47285-33733767271042
City State Zip Code Vista CA 92084-2733	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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 ▼ 15.00	

Full Name (Last, First, Middle Initial) B. Joseph Aschauer		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 504 Graycroft Drive Southwest		Transaction ID: 47285-26331728696823
City State Zip Code Huntsville AL 35802-1751	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

Full Name (Last, First, Middle Initial) C. Effie Avery		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 101 Backer Circle		Transaction ID: 47295-93981570005417
City State Zip Code Jacksonville NC 28540-7501	Amount of Each Receipt this Period 1.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00	

SUBTOTAL of Receipts This Page (optional) ▶	1.00
TOTAL This Period (last page this line number only) ▶	1.00

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 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Doris Avilla		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 3509 Wardrobe Avenue		Transaction ID: 16452-60291689634323	
City State Zip Code Merced CA 95340-8727	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Central Valley Pea	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Jean Babeaux		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address Villa Maria Comm Center		Transaction ID: 40974-69215029478073	
City State Zip Code Villa Maria PA 16155	Amount of Each Receipt this Period 1.00		
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 ▼ 1.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. John Bachman		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006	
Mailing Address 5725 N Meadows Boulevard		Transaction ID: 89510-49477785825729	
City State Zip Code Columbus OH 43229-4189	Amount of Each Receipt this Period 5.00		
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 ▼ 10.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	1.00
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 11 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address 4465 Kensington Court

City State Zip Code
Gurnee IL 60031-6215

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 ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 76962-53786867856979

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Marcia Barnard

Mailing Address 101 S Pearl Street Apt. W4C

City State Zip Code
Albany NY 12207-1426

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

Name of Employer Retired Occupation Former Secretary

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-67412966489792

Amount of Each Receipt this Period
6.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

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

Mailing Address 187 Havre Street

City State Zip Code
East Boston MA 02128-3026

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

Name of Employer U.S. Postal Service Occupation Mail Processing Clerk

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 76962-21679323911667

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶ **0.00**

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 12 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mike Berry		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 1160 Northwest North River Drive		Transaction ID: 17004-22956484556198
City State Zip Code Miami FL 33136-2929	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Jackson Memorial Hospital Registered Nurse		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Dorothy Bertucci		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 1330 Colonial Court		Transaction ID: 67141-88222903013230
City State Zip Code Mamaroneck NY 10543-4244	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Partner- Real Estate Real Estate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Joseph Bessler		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 50 Bellemonte Avenue		Transaction ID: 16510-53309267759323
City State Zip Code Lakeside Park KY 41017-3174	Amount of Each Receipt this Period 25.00	
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 ▼ 25.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	200.00
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 13 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Kent Bettale		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 2803 Windford Dr		Transaction ID: 16452-71979922056198	
City State Zip Code Saint Louis MO 63129-3526	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer W.L. Gore & Associates Inc.	Occupation Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

B. Full Name (Last, First, Middle Initial) Mary Binieda		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006	
Mailing Address 906 Andover Drive		Transaction ID: 87491-86442202329636	
City State Zip Code Northville MI 48167-1059	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		Earmarked for Friends of Kathy Salvi	

C. Full Name (Last, First, Middle Initial) Edward Bitzan		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address PO Box 5184		Transaction ID: 47295-58601015806198	
City State Zip Code Grand Forks ND 58206-5184	Amount of Each Receipt this Period 25.00		
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 ▼ 90.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	50.00
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 14 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. James Bliss		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 84 Princeton Street		Transaction ID: 89510-79056948423386
City State Zip Code Garden City NY 11530-4025	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
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 ▼ 35.00	

Full Name (Last, First, Middle Initial) B. Wilbur Bolton		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 11273 Rochelle Street		Transaction ID: 16510-54862612485886
City State Zip Code Los Alamitos CA 90720-3948	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer AEGON Transamerica	Occupation Retired Actuary	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. James Bonner		Date of Receipt M M / D D / Y Y Y Y 03 / 03 / 2006
Mailing Address 12145 Lawrence Road		Transaction ID: 66762-30813235044479
City State Zip Code Brooklyn MI 49230-9581	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Self	Occupation Program Assistant	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL 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 15 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Patrick Borden		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 710 28th Street Southeast Apt. 170		Transaction ID: 16510-88189333677292
City State Zip Code Brainerd MN 56401-7387	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Country Fresh Bakery	Occupation Janitor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

B. Full Name (Last, First, Middle Initial) Ernest Bottom		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 1902 S 244th Street		Transaction ID: 85293-88062685728074
City State Zip Code Des Moines WA 98198-8644	Amount of Each Receipt this Period 250.00	
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 ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Ernest Bottom		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 1902 S 244th Street		Transaction ID: 85293-54624575376511
City State Zip Code Des Moines WA 98198-8644	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
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	

SUBTOTAL of Receipts This Page (optional) ▶	500.00
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 16 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. S. Bourdon		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 60 Susquehanna Avenue		Transaction ID: 89510-97814577817917	
City State Zip Code Cooperstown NY 13326-1240	Amount of Each Receipt this Period 3.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 3.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Mary Boushor		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 42 Ross Street		Transaction ID: 17590-75230044126511	
City State Zip Code Clark NJ 07066-2630	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. G. Brandenburg		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 1929 Belle Avenue		Transaction ID: 17004-88746279478074	
City State Zip Code San Carlos CA 94070-3727	Amount of Each Receipt this Period 10.00		
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 ▼ 20.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	10.00
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 17 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Marianne Braun

Mailing Address 279 Salisbury Square

City State Zip Code
Louisville KY 40207-3566

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 ▼ 50.00

Date of Receipt
MM / DD / YYYY
03 / 22 / 2006

Transaction ID: 32418-13720339536667

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Lucy Brewer

Mailing Address 4102 Skyline Drive

City State Zip Code
Suitland MD 20746-3409

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 ▼ 8.00

Date of Receipt
MM / DD / YYYY
03 / 13 / 2006

Transaction ID: 89510-53083437681198

Amount of Each Receipt this Period
8.00

Earmarked for Friends of Kathy Salvi

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

Mailing Address 3345 92nd Street

City State Zip Code
Flushing NY 11372-1851

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 90.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2006

Transaction ID: 19931-75465029478073

Amount of Each Receipt this Period
50.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	58.00
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 18 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Patricia Broderick

Mailing Address 5930 Rossmore Drive

City State Zip Code
Bethesda MD 20814-2232

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

Name of Employer Self-Employed Occupation
Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt
MM / DD / YYYY
03 / 10 / 2006

Transaction ID: 89851-90664309263230

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Elwood Brubaker

Mailing Address 2579 Graysonte Road

City State Zip Code
East Petersburg PA 17520

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 ▼ 20.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 16510-84206789731980

Amount of Each Receipt this Period
20.00

Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Charles Bucska

Mailing Address 1844 11th Street

City State Zip Code
Wyandotte MI 48192-3600

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 ▼ 10.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 16510-15702456235885

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	20.00
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 19 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Tim Burke		Date of Receipt M M / D D / Y Y Y Y Y 03 / 07 / 2006	
Mailing Address 7522 Pingree Road		Transaction ID: 60141-43494814634323	
City Pinckney	State MI	Zip Code 48169-8812	Amount of Each Receipt this Period 25.00
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 ▼ 50.00	
		Earmarked for Friends of Kathy Salvi	

B. Full Name (Last, First, Middle Initial) Gerald Bush		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006	
Mailing Address 10326 Memorial Drive		Transaction ID: 47285-22513979673385	
City Houston	State TX	Zip Code 77024-3207	Amount of Each Receipt this Period 5.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired		Occupation Geologist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 10.00	
		Earmarked for Friends of Kathy Salvi	

C. Full Name (Last, First, Middle Initial) Patty Cafferata		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2006	
Mailing Address 205 Urban Road		Transaction ID: 32418-43674868345261	
City Reno	State NV	Zip Code 89509-3662	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Cafferata and Assoc.		Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00	
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	30.00
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 20 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Ralph Calabrese		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 39 Greenbriar Drive		Transaction ID: 47295-53774660825729	
City Berkeley Heights	State NJ	Zip Code 07922-1242	Amount of Each Receipt this Period 25.00
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 ▼ 50.00		

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) B. Florence Campbell		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 184 Pine Street		Transaction ID: 87214-59376162290573	
City Rockville Centre	State NY	Zip Code 11570-2520	Amount of Each Receipt this Period 15.00
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 ▼ 55.00		

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) C. Patricia Campbell		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 6495 Weaver Road		Transaction ID: 16510-72878664731980	
City Rockford	State IL	Zip Code 61114-8109	Amount of Each Receipt this Period 50.00
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 ▼ 100.00		

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 21 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Roland Canepa		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006	
Mailing Address 30 Richard Lane		Transaction ID: 17590-54992312192917	
City State Zip Code West Long Branch NJ 07764-1650	Amount of Each Receipt this Period 15.00		
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 ▼ 30.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Charles Cantrell		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 2905 Rebano		Transaction ID: 16510-72082155942917	
City State Zip Code San Clemente CA 92673-3478	Amount of Each Receipt this Period 100.00		
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 ▼ 100.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Christine Caprio		Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2006	
Mailing Address 3341 Cochise Drive		Transaction ID: 87491-67487734556198	
City State Zip Code Pittsburgh PA 15241-1517	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
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 ▼ 25.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 22 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Kenneth Carlson		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 2824 S Union Street		Transaction ID: 89510-66833132505417	
City State Zip Code Rochester NY 14624-1030	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C	Earmarked for Friends of Kathy Salvi		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 30.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Brian Carmody		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 1 Roberts Road		Transaction ID: 17004-63021486997605	
City State Zip Code Enfield CT 06082-6126	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM] Earmarked for Friends of Kathy Salvi		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 25.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Russell Cassel		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 6847 Radbourne Road		Transaction ID: 20121-59902590513229	
City State Zip Code Upper Darby PA 19082-5235	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C	[MEMO ITEM] Earmarked for Friends of Kathy Salvi		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 50.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	30.00
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 23 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Jack Caveney

Mailing Address 17301 South Ridgeland Avenue

City State Zip Code
Tinley Park IL 60477-3093

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

Name of Employer Occupation
Panduit Corp. Director of Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2006

Transaction ID: 42790-37537783384323

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Giuseppe Cecchi

Mailing Address 1700 North Moore Street

City State Zip Code
Arlington VA 22209-2793

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

Name of Employer Occupation
IDI Group CDS President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 08 / 2006

Transaction ID: 61015-26830691099167

Amount of Each Receipt this Period
2500.00

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

Mailing Address 1700 North Moore Street

City State Zip Code
Arlington VA 22209-2793

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

Name of Employer Occupation
IDI Group CDS President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2006

Transaction ID: 76962-44991701841354

Amount of Each Receipt this Period
1000.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
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 24 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Paul Chavez		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 2983 E Pryor Drive		Transaction ID: 66762-10184878110885
City State Zip Code Fresno CA 93720-4486	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer None Occupation Student	Aggregate Year-to-Date ▼ 20.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Mary Christensen		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 53 Martins Lane		Transaction ID: 60380-68616884946823
City State Zip Code Berkeley Heights NJ 07922-1712	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Occupation	Aggregate Year-to-Date ▼ 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) A. Christopher		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 23 Wychwood Road		Transaction ID: 89510-35140627622604
City State Zip Code Livingston NJ 07039-3626	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 25.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	70.00
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 25 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Mary Kay Clark		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 174 Woodward Lane		Transaction ID: 16452-78763979673386
City State Zip Code Front Royal VA 22630-6831	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Occupation Seton Home Study School Director	Aggregate Year-to-Date ▼ 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Eula Colegrove		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 1624 Spencer Road		Transaction ID: 16510-64484804868698
City State Zip Code Mansfield PA 16933-9464	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 10.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. John Condon		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 15 Nepperhan Avenue		Transaction ID: 16452-63544863462448
City State Zip Code Hastings on Hudson NY 10706-4014	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 10.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	5.00
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 26 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Bob Cooper Mailing Address 788 Ranch Road City State Zip Code Vine Grove KY 40175-1040 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2006 Transaction ID: 32418-26394289731979 Amount of Each Receipt this Period 25.00
Name of Employer Self-Employed Occupation Retired Insurance Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Zoraida Cornejo Mailing Address 215 N Forest Ave City State Zip Code Mount Prospect IL 60056-2303 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006 Transaction ID: 60380-59836977720261 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Mary Corr Mailing Address 3343 Tennyson Street Northwest City State Zip Code Washington DC 20015-2442 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006 Transaction ID: 76962-99174135923386 Amount of Each Receipt this Period 15.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 27 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Robert Cosgrove		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 4528 Grand Avenue		Transaction ID: 17590-48963564634323	
City State Zip Code Western Springs IL 60558-1545	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Artist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

B. Full Name (Last, First, Middle Initial) Susan Couri		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 1515 Meadow Lane		Transaction ID: 17005-27241152524948	
City State Zip Code Glenview IL 60025-2347	Amount of Each Receipt this Period 25.00		
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 ▼ 60.00		
		Earmarked for Friends of Kathy Salvi	

C. Full Name (Last, First, Middle Initial) Patricia Croke		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address PO Box 542		Transaction ID: 76807-87098330259323	
City State Zip Code Brant Rock MA 02020-0542	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer None		Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	25.00
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 28 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Shirley Cross		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006	
Mailing Address 10 Spring Hill Road		Transaction ID: 89510-64376467466355	
City East Sandwich	State MA	Amount of Each Receipt this Period 25.00	
Zip Code 02537-1068		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	
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 ▼ 25.00		

Full Name (Last, First, Middle Initial) B. Clayton Croy		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2006	
Mailing Address 269 S Kellner Road		Transaction ID: 60380-34775942564010	
City Columbus	State OH	Amount of Each Receipt this Period 100.00	
Zip Code 43209-2042		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C			
Name of Employer Trinity Lutheran Seminary	Occupation Teacher		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) C. Mary Cull		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006	
Mailing Address 209 Holiday Road Apt. 218		Transaction ID: 17590-37093752622604	
City Coralville	State IA	Amount of Each Receipt this Period 10.00	
Zip Code 52241-1133		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C			
Name of Employer Univ. of IOWA	Occupation Pharmacist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00		

SUBTOTAL of Receipts This Page (optional)	100.00
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 29 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Lester Cundiff		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 208 Walker Road		Transaction ID: 17004-84899538755417
City State Zip Code Landenberg PA 19350-1559	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
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 ▼ 35.00	

Full Name (Last, First, Middle Initial) B. Chris Currie		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 4100 Crittenden Street		Transaction ID: 15548-35721987485885
City State Zip Code Hyattsville MD 20781-2122	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer IEEE-United States of America	Occupation Marketing Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Stephen Czebiniak		Date of Receipt M M / D D / Y Y Y Y 03 / 23 / 2006
Mailing Address 19 Port Street		Transaction ID: 63607-86251467466355
City State Zip Code Port Crane NY 13833-1506	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Termo Cidtie	Occupation Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
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 30 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Elizabeth Daly		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 100 Upton Drive		Transaction ID: 89510-42445009946823
City State Zip Code Sound Beach NY 11789-2046	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired Occupation Librarian		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Corey Darr		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006
Mailing Address 1300 W. Ray Brunum Road		Transaction ID: 67141-92443484067917
City State Zip Code Tishomingo OK 73460	Amount of Each Receipt this Period 20.00	
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 ▼ 30.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Blanche Deane		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 16 Pocono Place		Transaction ID: 89510-13215273618698
City State Zip Code Toms River NJ 08753-1622	Amount of Each Receipt this Period 10.00	
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 ▼ 10.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	30.00
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 31 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Ann Debrates		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 403 Delaney Drive		Transaction ID: 16510-90380495786667
City Jacksonville	State IL Zip Code 62650-2680	
Amount of Each Receipt this Period 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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 ▼ 10.00	

Full Name (Last, First, Middle Initial) B. Anthony DeGennaro		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 101 Bleeker Road Apt. 1		Transaction ID: 16452-41405886411667
City Guilderland	State NY Zip Code 12084-9664	
Amount of Each Receipt this Period 5.00		Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C		
Name of Employer None	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

Full Name (Last, First, Middle Initial) C. Richard Deitrich		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2006
Mailing Address 438 Forest Avenue		Transaction ID: 87234-57131594419479
City Bellefonte	State PA Zip Code 16823-8252	
Amount of Each Receipt this Period 1.00		Earmarked for Friends of Kathy Salvi
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 ▼ 1.00	

SUBTOTAL of Receipts This Page (optional) ▶	6.00
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 32 / 245		
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Hermine Dillon Mailing Address 5819 Calpine Drive City San Jose State CA Zip Code 95123-3706 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17004-71490114927292 Amount of Each Receipt this Period 25.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 25.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Druscilla Doehrman Mailing Address 3430 Fort Charles Drive City Naples State FL Zip Code 34102-7929 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47315-00609987974166 Amount of Each Receipt this Period 500.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 500.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Paul Donohue Mailing Address 1661 Prospect Avenue City East Meadow State NY Zip Code 11554-2928 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 20121-97567385435105 Amount of Each Receipt this Period 25.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 35.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	25.00
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 33 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Sheila Dowling

Mailing Address 1750 Dowd Drive

City State Zip Code
Saint Louis MO 63136-2429

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17004-06817263364791

Amount of Each Receipt this Period
5.00

Earmarked for Friends of
Kathy Salvi

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

Mailing Address 66 Fisher Road

City State Zip Code
Arlington MA 02476-7644

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 ▼
10.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17590-69042605161667

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Daniel Duncan

Mailing Address 364 Marie Common

City State Zip Code
Livermore CA 94550-7230

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2006

Transaction ID: 60262-29545229673385

Amount of Each Receipt this Period
50.00

Earmarked for Friends of
Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ► **55.00**

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 34 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mildred Dunn		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 2121 Meadowlark Road #420		Transaction ID: 47284-51383608579636	
City Manhattan	State KS	Zip Code 66502-7511	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer N/A	Occupation Retired - Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Thomas Eaton		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 2611 Southwick Drive		Transaction ID: 15442-06747072935104	
City Greensboro	State NC	Zip Code 27455-0834	Amount of Each Receipt this Period 2.00
FEC ID number of contributing federal political committee. C			
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 ▼ 27.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Thomas Eaton		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 2611 Southwick Drive		Transaction ID: 16510-68575686216355	
City Greensboro	State NC	Zip Code 27455-0834	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
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 ▼ 27.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	52.00
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 35 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Bob Edmondson Mailing Address 110 W El Paseo Street City State Zip Code Denton TX 76205-8590 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-70312136411667 Amount of Each Receipt this Period 25.00
Name of Employer: Double E Enterprises Occupation: Data Processing & Political Consulting Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Irwin Eleson Mailing Address 916 Rochester Drive City State Zip Code Billings MT 59101-7043 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-59966677427292 Amount of Each Receipt this Period 25.00
Name of Employer: Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Helen Farson Mailing Address 211 S 6th Street Apt. 111 City State Zip Code Alhambra CA 91801-3672 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-45403689146042 Amount of Each Receipt this Period 15.00
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 ▼ 35.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	50.00
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 36 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. James Fausek		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006
Mailing Address 15201 Olive Boulevard #274		Transaction ID: 16510-74927920103073
City State Zip Code Chesterfield MO 63017-1836	Amount of Each Receipt this Period 25.00	
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 ▼ 25.00	Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) B. Ken Feduniewicz		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006
Mailing Address PO Box 1016		Transaction ID: 47295-58311098814011
City State Zip Code Island Heights NJ 08732-1016	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Self-Employed Bookdealer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) C. Robert Ferguson		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address 5007 Flower Ridge Court		Transaction ID: 20183-10502260923385
City State Zip Code Katy TX 77494-2346	Amount of Each Receipt this Period 2.00	
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 ▼ 5.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	27.00
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 37 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Martha Finck

Mailing Address 12120 Southwest Imperial Avenue Ap

City State Zip Code
Portland OR 97224-2529

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-96236819028855

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

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

Mailing Address 19365 Cypress Ridge Terrace #821

City State Zip Code
Lansdowne VA 20176-8436

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

Name of Employer Occupation
Self-Employed Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 89510-83768862485886

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Kim Foster

Mailing Address 8454 Lakewood Drive

City State Zip Code
Chatham IL 62629-8033

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 06 / 2006

Transaction ID: 60380-31010073423385

Amount of Each Receipt this Period
100.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	100.00
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 38 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Chris Fotias

Mailing Address 347 E Walnut Avenue

City Visalia State CA Zip Code 93277-5458

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 ▼ 12.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17590-98022097349167

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

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

Mailing Address 194 Central Street

City Gardner State MA Zip Code 01440-4306

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17004-73106020689011

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Maurice Friedman

Mailing Address 15332 E 8th Avenue

City Aurora State CO Zip Code 80011-7102

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 6.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 16510-28718203306198

Amount of Each Receipt this Period
4.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 39 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Albert Friedrich		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006	
Mailing Address PO Box 951		Transaction ID: 76962-76916140317917	
City Cullman	State AL	Zip Code 35056-0951	Amount of Each Receipt this Period 25.00
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 ▼ 50.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Elizabeth Fulton		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 10306 Mystic Meadow Way		Transaction ID: 19772-78765505552292	
City Oakton	State VA	Zip Code 22124-1769	Amount of Each Receipt this Period 250.00
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 ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Kathleen Gadarowski		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 5616 W Leland Avenue		Transaction ID: 47295-73124331235886	
City Chicago	State IL	Zip Code 60630-3222	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer St. Mary of Nazareth Hospital	Occupation Pathology Assistant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	275.00
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 40 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Anne Galivan		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006	
Mailing Address 337 Beaver Lake Road		Transaction ID: 47285-15111941099167	
City State Zip Code Tallahassee FL 32312-9734	Amount of Each Receipt this Period 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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 ▼ 50.00		

Full Name (Last, First, Middle Initial) B. Mark Gallagher		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006	
Mailing Address 2541 Holman Avenue		Transaction ID: 19931-68297976255417	
City State Zip Code Silver Spring MD 20910-1134	Amount of Each Receipt this Period 100.00		Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation USCC Lobbyist	Aggregate Year-to-Date ▼ 100.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Carole Gangloff		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 3104 Bangor Court		Transaction ID: 15548-09814089536666	
City State Zip Code Las Vegas NV 89134-8961	Amount of Each Receipt this Period 100.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Registered Nurse	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	100.00
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 41 / 245
(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
							17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Patricia Garcia

Mailing Address 1040 Stratmore Avenue

City State Zip Code
Pittsburgh PA 15205-2413

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 19931-37862795591354

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Larry Garvey

Mailing Address 111 Veterans Boulevard, Suite 402

City State Zip Code
Metairie LA 70005-1155

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

Name of Employer Occupation
Wentworth Industries Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2006

Transaction ID: 47315-16372317075729

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Larry Garvey

Mailing Address 111 Veterans Boulevard, Suite 402

City State Zip Code
Metairie LA 70005-1155

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

Name of Employer Occupation
Wentworth Industries Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 27 / 2006

Transaction ID: 87515-25191897153854

Amount of Each Receipt this Period
2000.00

[MEMO ITEM]
Earmarked for Musgrave for
Congress

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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 42 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. B. Gaudino		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 560 N Brea Boulevard Apt. 30		Transaction ID: 47295-03881472349166	
City State Zip Code Brea CA 92821-3357	Amount of Each Receipt this Period 50.00		
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 ▼ 100.00	
[MEMO ITEM] Earmarked for Friends of Kathy Salvi			

Full Name (Last, First, Middle Initial) B. Edward Gehringer		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 3925 Lake Ferry Drive		Transaction ID: 60380-77784365415573	
City State Zip Code Raleigh NC 27606-8062	Amount of Each Receipt this Period 20.00		
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 ▼ 20.00	
Earmarked for Friends of Kathy Salvi			

Full Name (Last, First, Middle Initial) C. Albert Geimer		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 5055 Madison Street Unit 208		Transaction ID: 17590-17135256528854	
City State Zip Code Skokie IL 60077-2558	Amount of Each Receipt this Period 25.00		
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 ▼ 25.00	
[MEMO ITEM] Earmarked for Friends of Kathy Salvi			

SUBTOTAL of Receipts This Page (optional) ▶	20.00
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 43 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address 1410 Sheridan Road Apt. 5D

City State Zip Code
Wilmette IL 60091-1896

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

Name of Employer Occupation
Housewife Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2006

Transaction ID: 17483-05743044614791

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Ruth Gensman

Mailing Address 14176 Southwest 111th Court

City State Zip Code
Dunnellon FL 34432-5624

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 ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 16 / 2006

Transaction ID: 17483-41964358091354

Amount of Each Receipt this Period
25.00

Earmarked for Friends of Kathy Salvi

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

Mailing Address 324 S Edgewood

City State Zip Code
La Grange IL 60525-2152

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2006

Transaction ID: 47285-12943667173385

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	25.00
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 44 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Rosemary Goelz
 Mailing Address 2020 Woodland Avenue
 City State Zip Code
 Park Ridge IL 60068-1913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 16 / 2006
Transaction ID: 17004-93513125181199
 Amount of Each Receipt this Period
 1.00
 Earmarked for Friends of
 Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Kristin Gorak
 Mailing Address 3311 Midlane Dr
 City State Zip Code
 Wadsworth IL 60083-9458
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 06 / 2006
Transaction ID: 60860-96166628599167
 Amount of Each Receipt this Period
 10.00
[MEMO ITEM]
 Earmarked for Friends of
 Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Wade Goss
 Mailing Address 4537 Murphy School Road
 City State Zip Code
 Durham NC 27705-8026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 15 / 2006
Transaction ID: 40974-62978762388230
 Amount of Each Receipt this Period
 1.00
 Earmarked for Friends of
 Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶ 2.00
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 45 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Carlyle Gregory		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 6709 Kennedy Lane		Transaction ID: 47315-14304751157760	
City Falls Church	State VA	Zip Code 22042-4116	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. John Gregory		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 5305 Palomino Street		Transaction ID: 89510-16506594419479	
City White Marsh	State MD	Zip Code 21162-1002	Amount of Each Receipt this Period 2.00
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 ▼ 4.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. John Grogan		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 138 Harding Avenue		Transaction ID: 89510-37704104185104	
City Kingston	State NY	Zip Code 12401-2004	Amount of Each Receipt this Period 15.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Social Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 46 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mary Guerrero Mailing Address 403 Carlton Lane City Rocky Hill State CT Zip Code 06067-1056 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2006 Transaction ID: 87234-97877138853074 Amount of Each Receipt this Period 1.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Harvey Gutwein Mailing Address 4 W Violet Drive City Francesville State IN Zip Code 47946-8313 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2006 Transaction ID: 49236-30192202329635 Amount of Each Receipt this Period 25.00
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 ▼ 25.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Russell Haas Mailing Address 13225 W 15th Drive City Golden State CO Zip Code 80401-3505 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-04793947935104 Amount of Each Receipt this Period 30.00
Name of Employer Occupation United Air Lines Pilot Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 30.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	26.00
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 47 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Greg Hamblen Mailing Address 1102 E Spruce Street City Jerseyville State IL Zip Code 62052-2805 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-41906374692917 Amount of Each Receipt this Period 15.00
Name of Employer Jersey County (Courthouse) Occupation Janitor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Agnes Hansen Mailing Address 2805 S 125th Street Apt. 308 City Seattle State WA Zip Code 98168-2493 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-87719362974167 Amount of Each Receipt this Period 25.00
Name of Employer Retired Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Gerald Harold Mailing Address 41 Circuit Lane City Waltham State MA Zip Code 02453-7009 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006 Transaction ID: 16452-72768801450730 Amount of Each Receipt this Period 15.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 48 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Carolyn Harris Mailing Address 6102 E 127th Street City Grandview State MO Zip Code 64030-1913 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2006 Transaction ID: 87234-00576418638229 Amount of Each Receipt this Period 25.00
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 ▼ 25.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) John Hartford Mailing Address PO Box 58 519 N. Wood City Gibson City State IL Zip Code 60936-0058 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 07 / 2006 Transaction ID: 60275-48804873228073 Amount of Each Receipt this Period 10.00
Name of Employer Hartford & Hartford O2 Occupation Oxygen Distributor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Waldemar Haselbarth Mailing Address 822 Wisconsin Street Apt. 7 City Lake Geneva State WI Zip Code 53147-1829 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-84211367368698 Amount of Each Receipt this Period 5.00
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 ▼ 5.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	25.00
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 49 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Duane Haugan Mailing Address 6121 E Walton Street City Long Beach State CA Zip Code 90815-2244 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 40974-73843020200730 Amount of Each Receipt this Period 1.00
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 ▼ 2.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) R. Hausman Mailing Address 12331 Beauregard Drive City Houston State TX Zip Code 77024-4928 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-03977602720260 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Agnes Hayden Mailing Address 1807 Southeast Killlean Court City Port St. Lucie State FL Zip Code 34952-6058 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-90095156431199 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	1.00
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 50 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. James Healy		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 6474 Dry Harbor Road		Transaction ID: 19931-62342470884323
City State Zip Code Middle Village NY 11379-2345	Amount of Each Receipt this Period 20.00	
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 ▼ 20.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) B. Donald Heidt		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 1626 W Colonial Drive		Transaction ID: 16758-50188845396042
City State Zip Code Salisbury NC 28144-2265	Amount of Each Receipt this Period 7.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 7.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) C. Charles Heisey		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 17 E High Street		Transaction ID: 17004-54810732603073
City State Zip Code Maytown PA 17550	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 5.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	5.00
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 51 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Peter Helfrich		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address 10 Knollbrook Road Apt. 3		Transaction ID: 20121-91477602720261
City State Zip Code Rochester NY 14610-2152	Amount of Each Receipt this Period 50.00	
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 ▼ 100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Doris Hendricks		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006
Mailing Address 8810 Walther Boulevard Apt. 2229		Transaction ID: 76962-68531435728073
City State Zip Code Baltimore MD 21234-5759	Amount of Each Receipt this Period 50.00	
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 ▼ 100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Patricia Hill		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2006
Mailing Address 518 Savannah Avenue Apt. D		Transaction ID: 32418-97086733579636
City State Zip Code Elizabethtown KY 42701	Amount of Each Receipt this Period 30.00	
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 ▼ 30.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 52 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mark Hinderer		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address PO Box 661		Transaction ID: 40974-82702273130417
City Waterville	State WA	Zip Code 98858-0661
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Self	Occupation Agriculture	Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

B. Full Name (Last, First, Middle Initial) Thomas Hoesl		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 5728 Kroegermount Drive		Transaction ID: 89510-39442080259323
City Cincinnati	State OH	Zip Code 45239-7134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00
Name of Employer Retired	Occupation Retired	Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00	

C. Full Name (Last, First, Middle Initial) Robert Hoffman		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006
Mailing Address 2400 Flaxen Mill Court		Transaction ID: 88118-36845034360885
City Jerome	State IL	Zip Code 62704-6540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer	Occupation	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

SUBTOTAL of Receipts This Page (optional) ▶	21.00
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 53 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Joseph Hopfner		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 3521 Orchard Road		Transaction ID: 89510-63389223814011
City State Zip Code Huntingdon Valley PA 19006-3232	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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 ▼ 25.00	

Full Name (Last, First, Middle Initial) B. Milton Horst		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 10118 44th Avenue Southwest		Transaction ID: 47285-18757265806198
City State Zip Code Seattle WA 98146-1027	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Boeing	Occupation Software Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	

Full Name (Last, First, Middle Initial) C. Henry Houin		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 757 Hickory Street		Transaction ID: 19931-04745119810104
City State Zip Code Gretna LA 70056-5112	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Retired	Occupation Federal Employee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	

SUBTOTAL of Receipts This Page (optional) ▶	5.00
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 54 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Stephen Hubbell		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 21345 Northwood Lane		Transaction ID: 67141-77117556333542	
City State Zip Code Lebanon MO 65536-8000	Amount of Each Receipt this Period 10.00		
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 ▼ 20.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Rosemarie Husney		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 1170 Chambers Road Apt. 20B		Transaction ID: 19931-47752016782761	
City State Zip Code Columbus OH 43212-1708	Amount of Each Receipt this Period 14.00		
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 ▼ 14.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Brian Jackson		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 7014 Shay Court		Transaction ID: 16510-53257387876511	
City State Zip Code Highland CA 92346-7700	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	10.00
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 55 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Lela Jackson

Mailing Address 236 Rhode Island Street Northeast

City State Zip Code
Albuquerque NM 87108-2224

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-68119448423386

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Lauralynn Jones

Mailing Address 324 34th Street

City State Zip Code
Sacramento CA 95816-3339

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-32270449399948

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Phyllis Joseph

Mailing Address 6466 State Road Apt. M8

City State Zip Code
Parma OH 44134-4172

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

Name of Employer Occupation
Retired Educator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2006

Transaction ID: 87491-26868838071823

Amount of Each Receipt this Period
25.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ► **25.00**

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 56 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Julia Kabance		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006	
Mailing Address 104 E Tomahawk Drive		Transaction ID: 47295-62331789731979	
City State Zip Code St. Marys KS 66536-1868	Amount of Each Receipt this Period 25.00		
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 ▼ 25.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Mary Kaehler		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2006	
Mailing Address 1025 E Armstrong Road		Transaction ID: 32418-95679873228074	
City State Zip Code Lodi CA 95242-9423	Amount of Each Receipt this Period 50.00		
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 ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Barry Katz		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006	
Mailing Address 699 W 239th Street Apt. 4U		Transaction ID: 89510-69500368833542	
City State Zip Code Bronx NY 10463-1248	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed Occupation Investor			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 65.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	25.00
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 57 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Nancy Kawich Mailing Address PO Box 103 City Van Orin State IL Zip Code 61374-0103 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47295-45534914731979 Amount of Each Receipt this Period 10.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 10.00		

B. Full Name (Last, First, Middle Initial) John Keane Mailing Address 33 Ellsworth Avenue City Staten Island State NY Zip Code 10312-2501 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-29211062192917 Amount of Each Receipt this Period 75.00
Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 275.00		

C. Full Name (Last, First, Middle Initial) John Keane Mailing Address 33 Ellsworth Avenue City Staten Island State NY Zip Code 10312-2501 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-28258913755417 Amount of Each Receipt this Period 100.00
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 ▼ 275.00		

SUBTOTAL of Receipts This Page (optional)	110.00
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 58 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Larae Kendall Mailing Address 276 E 100 N City Nephi State UT Zip Code 84648-1508 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 20121-86106508970261 Amount of Each Receipt this Period 5.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 10.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Michael Kessler Mailing Address 19197 Beland Street City Detroit State MI Zip Code 48234-3523 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-69314211606980 Amount of Each Receipt this Period 20.00
Name of Employer SBC Midwest Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Css Technician Aggregate Year-to-Date ▼ 20.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) William Kidwell Mailing Address 3716 Garden Avenue City Miami Beach State FL Zip Code 33140-3851 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17004-79391115903855 Amount of Each Receipt this Period 20.00
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 20.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	20.00
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 59 / 245
	(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Larry King Mailing Address PO Box 1268 City State Zip Code Morrisville VT 05661-1268 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-92956179380417 Amount of Each Receipt this Period 30.00
Name of Employer Occupation Unemployed Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Carol Knox Mailing Address 480 Green Bridge Lane City State Zip Code Prospect Heights IL 60070-3465 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006 Transaction ID: 60380-99337404966355 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Walter Kobialka Mailing Address 14 Merrimack Street Apt. 205 City State Zip Code Milford NH 03055-3831 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-32883852720260 Amount of Each Receipt this Period 100.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	50.00
TOTAL This Period (last page this line number only) ▶	50.00

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 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Joseph Koch Mailing Address 15812 Horse Creek Street City San Antonio State TX Zip Code 78232-2710 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-63918703794480 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 50.00		

B. Full Name (Last, First, Middle Initial) Jerome Kohel Mailing Address 8226 Lake Vista Drive City Richland State MI Zip Code 49083-9340 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-91654604673386 Amount of Each Receipt this Period 10.00
Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 10.00		

C. Full Name (Last, First, Middle Initial) Patricia Kohl Mailing Address 10633 W Sequoia Drive City Sun City State AZ Zip Code 85373-1914 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-31124514341354 Amount of Each Receipt this Period 5.00
Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 5.00		

SUBTOTAL of Receipts This Page (optional)	0.00
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 61 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Dorothy Kohler

Mailing Address 867 Greendale Avenue

City State Zip Code
Needham MA 02492-4413

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 45.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2006

Transaction ID: 19931-65864199399948

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Stanley Kolniak

Mailing Address 2207 Surrey Lane

City State Zip Code
Bossier City LA 71111-5541

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 ▼ 30.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-67373293638230

Amount of Each Receipt this Period
30.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
W. Krotoski

Mailing Address 11620 Rue De Tonti

City State Zip Code
Baton Rouge LA 70810-4565

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

Name of Employer Occupation
La. Right To Life Federation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 29 / 2006

Transaction ID: 85870-93571108579636

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 62 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Kenneth Krueger		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006	
Mailing Address 832 Oak Ridge Point Northeast		Transaction ID: 17004-96641176939011	
City State Zip Code Blaine MN 55434-3033	Amount of Each Receipt this Period 1.00		
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 ▼ 6.00	
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. T. Krumrey		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 4 Lynn Lane		Transaction ID: 40974-34533327817917	
City State Zip Code Oceanside CA 92054-7829	Amount of Each Receipt this Period 5.00		
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 ▼ 5.00	
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Everett Kulas		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006	
Mailing Address 3125 Idaho Avenue N		Transaction ID: 47285-83503359556198	
City State Zip Code Minneapolis MN 55427-2930	Amount of Each Receipt this Period 10.00		
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 ▼ 10.00	
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	6.00
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 63 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Nicholas Lally Mailing Address 1301 64th St. W City Bradenton State FL Zip Code 34209-4550 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-91148012876511 Amount of Each Receipt this Period 50.00
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 ▼ 100.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Jean Paul Lalplante Mailing Address 64 N Elm Street Apt. 2 City St. Albans State VT Zip Code 05478-2141 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-04447573423385 Amount of Each Receipt this Period 5.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Kenneth Larkin Mailing Address 717 Doctor Gorman Drive City Belle Chasse State LA Zip Code 70037-2210 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-09682863950729 Amount of Each Receipt this Period 10.00
Name of Employer Bell South Occupation Network Sales Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	5.00
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 64 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Steve Laughlin Mailing Address PO Box 293 City State Zip Code Mount Hope KS 67108-0293 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-27019900083542 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Self-Employed General Contractor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) France Laux Mailing Address 20107 N 109th Drive City State Zip Code Sun City AZ 85373-3322 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006 Transaction ID: 47284-47553652524948 Amount of Each Receipt this Period 25.00
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 ▼ 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Jeanne Lazar Mailing Address 101 Lincoln Avenue Apt. 4B City State Zip Code Mineola NY 11501-2820 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-09138125181198 Amount of Each Receipt this Period 25.00
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 ▼ 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 65 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Cora Leenheer		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 4024 Douglas Mountain Drive		Transaction ID: 60380-92223757505417	
City State Zip Code Golden CO 80403-7702	Amount of Each Receipt this Period 25.00		
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 ▼ 25.00		
		Earmarked for Friends of Kathy Salvi	

B. Full Name (Last, First, Middle Initial) Francis Lehar		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address PO Box 1482 11 Norwood Avenue		Transaction ID: 16452-03693789243698	
City State Zip Code Manchester MA 01944-0856	Amount of Each Receipt this Period 100.00		
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 ▼ 100.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

C. Full Name (Last, First, Middle Initial) Edna Lehmann		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 1833 Eden Road		Transaction ID: 89510-70985049009323	
City State Zip Code Hamersville OH 45130-9720	Amount of Each Receipt this Period 2.00		
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 ▼ 2.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	27.00
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 66 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Daniel Lieuwen Mailing Address 285 N Bridge Street City State Zip Code Somerville NJ 08876-1643 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 16452-67472475767136 Amount of Each Receipt this Period 100.00
Name of Employer: Lieuwen Occupation: Comp. Science Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 100.00		

B. Full Name (Last, First, Middle Initial) John Macejka Mailing Address 343 Wellington Road City State Zip Code Mineola NY 11501-1437 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-07311648130416 Amount of Each Receipt this Period 25.00
Name of Employer: Retired Occupation: Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 50.00		

C. Full Name (Last, First, Middle Initial) Ursula Marie Mailing Address 1903 Norhurst Way N City State Zip Code Catonsville MD 21228-4111 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-88633364439011 Amount of Each Receipt this Period 1.00
Name of Employer: Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 1.00		

SUBTOTAL of Receipts This Page (optional)	▶	1.00
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 67 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Doris Marshall		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address PO Box 350085		Transaction ID: 19931-26354616880417
City State Zip Code Grand Island FL 32735-0085	Amount of Each Receipt this Period 20.00	
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 ▼ 20.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Suzanne Martensen		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address 746 Tracy Lane		Transaction ID: 19931-77317446470261
City State Zip Code Loda IL 60948-9793	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation School Librarian Retired	Aggregate Year-to-Date ▼ 20.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Daniel Martin		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address RR 3 Box 115		Transaction ID: 19388-41758364439011
City State Zip Code Carrollton IL 62016-9537	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	20.00
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 68 / 245		
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Alex Martini		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 623 Washington Boulevard		Transaction ID: 17004-69727724790573	
City Oak Park	State IL	Zip Code 60302-3944	Amount of Each Receipt this Period 1.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.00	
Name of Employer	Occupation	Earmarked for Friends of Kathy Salvi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00		

Full Name (Last, First, Middle Initial) B. Leonard Martz		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 6823 W 112th Street		Transaction ID: 19931-33588808774948	
City Worth	State IL	Zip Code 60482-2005	Amount of Each Receipt this Period 2.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.00	
Name of Employer Chicago Public Schools	Occupation Teacher & Minister	Earmarked for Friends of Kathy Salvi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00		

Full Name (Last, First, Middle Initial) C. Rita Matarese		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address PO Box 62		Transaction ID: 89510-70397585630417	
City Penns Park	State PA	Zip Code 18943-0062	Amount of Each Receipt this Period 2.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.00	
Name of Employer Retired	Occupation Retired	Earmarked for Friends of Kathy Salvi	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3.00		

SUBTOTAL of Receipts This Page (optional) ▶	5.00
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 69 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Herb Mattingly		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 204 Hall Street		Transaction ID: 89510-06245058774948	
City Glasgow	State KY	Zip Code 42141-2024	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer Environmental Consultant	Occupation Field Services		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Jerome Maurseth		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 822 Northwest Murray Boulevard Pmb 307		Transaction ID: 47295-86903017759323	
City Portland	State OR	Zip Code 97229-5868	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer Boone Remodel, Inc.	Occupation Office Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Gloria Mayoh		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 5104 Vale Court Southeast		Transaction ID: 47295-73440188169480	
City Olympia	State WA	Zip Code 98513-4675	Amount of Each Receipt this Period 20.00
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 ▼ 20.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	50.00
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 70 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address 1490 Lake Shore Dr. S

City State Zip Code
Barrington IL 60010-3532

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

Name of Employer Occupation
McAndrews, Held, Mallox Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17483-94553774595261

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

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

Mailing Address 1490 Lake Shore Dr. S

City State Zip Code
Barrington IL 60010-3532

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

Name of Employer Occupation
McAndrews, Held, Mallox Lawyer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17483-95135134458542

Amount of Each Receipt this Period
1000.00

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

Mailing Address 15017 7th Avenue

City State Zip Code
Whitestone NY 11357-1208

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 ▼ 25.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2006

Transaction ID: 76962-91810244321824

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 71 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Richard McDonald Mailing Address 15859 Buckingham Avenue City State Zip Code Franklin MI 48025-3307 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-58033388853073 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 50.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Jerome McDougal Mailing Address 44 Captains Drive City State Zip Code Islip NY 11751-4514 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006 Transaction ID: 19772-95426577329636 Amount of Each Receipt this Period 250.00
Name of Employer Occupation River Bank Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 250.00		

C. Full Name (Last, First, Middle Initial) Lorraine McGlynn Mailing Address 221 Oakland Place City State Zip Code North Wales PA 19454-2437 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 03 / 2006 Transaction ID: 66762-85467165708542 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 25.00		Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	300.00
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 72 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Barrie McHugh		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 12201 Southwest 69th Court		Transaction ID: 47285-31283205747604	
City State Zip Code Miami FL 33156-5425	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self-Employed	Occupation Contractor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Mary McMonagle		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 4030 Kottler Drive		Transaction ID: 16510-14944094419479	
City State Zip Code Lafayette Hill PA 19444-1516	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Aamco Transmissions	Occupation Lawyer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Desmond McNelis		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 210 Belmont Forest Court Unit 102		Transaction ID: 89510-91007632017136	
City State Zip Code Timonium MD 21093-7713	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed-Retired	Occupation Retired Medical Psychiatrist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	10.00
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 73 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Frederick McNicholl Mailing Address 5339 212th Street City Oakland Gardens State NY Zip Code 11364-1811 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 16452-15765017271042 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	0	6	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	5		2	0	0	6														
10.00																							
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 ▼ <table border="1"> <tr> <td>10.00</td> </tr> </table>		10.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi																				
10.00																							

B. Full Name (Last, First, Middle Initial) Robert McRae Mailing Address PO Box 477 City Graceville State FL Zip Code 32440-0477 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 47285-55009096860886 Amount of Each Receipt this Period <table border="1"> <tr> <td>100.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	6	100.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		2	0		2	0	0	6														
100.00																							
Name of Employer Self-Employed Occupation Lumber Manufacturing Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>100.00</td> </tr> </table>		100.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi																				
100.00																							

C. Full Name (Last, First, Middle Initial) Margaret Miksch Mailing Address 2521 Belt View Drive City Helena State MT Zip Code 59601-5606 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 16452-20869082212448 Amount of Each Receipt this Period <table border="1"> <tr> <td>35.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	0	6	35.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	5		2	0	0	6														
35.00																							
Name of Employer Montana State Auditors Office Occupation Actuary Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>60.00</td> </tr> </table>		60.00	Earmarked for Friends of Kathy Salvi																				
60.00																							

SUBTOTAL of Receipts This Page (optional) ▶	<table border="1"> <tr> <td>35.00</td> </tr> </table>	35.00
35.00		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td></td> </tr> </table>	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 74 / 245
	(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Thomas Mills		Date of Receipt MM / DD / YYYY 03 / 14 / 2006
Mailing Address 7708 Hayfield Road		Transaction ID: 76962-79079836606980
City Alexandria	State VA	Zip Code 22315-4052
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer Danes and Moore Inc.	Occupation Engineer	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	

Full Name (Last, First, Middle Initial) B. Jorge Miyares		Date of Receipt MM / DD / YYYY 03 / 17 / 2006
Mailing Address 6321 13th Avenue N		Transaction ID: 20121-15548342466354
City St. Petersburg	State FL	Zip Code 33710-5507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer N/A	Occupation Retired Dentist	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) C. Clifton Morris		Date of Receipt MM / DD / YYYY 03 / 13 / 2006
Mailing Address 2725 Nazareth Road		Transaction ID: 89510-45286196470261
City Easton	State PA	Zip Code 18045-2716
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Retired	Occupation Retired	Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

SUBTOTAL of Receipts This Page (optional)	50.00
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 75 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Henry Morrissey		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 4035 Gunderson Avenue		Transaction ID: 17004-09739321470260	
City State Zip Code Stickney IL 60402-4150	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Loyola	Occupation Molecular Biologist		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Jean Mosher		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006	
Mailing Address 256 Winding Way		Transaction ID: 60380-20536440610885	
City State Zip Code Camp Hill PA 17011-8463	Amount of Each Receipt this Period 50.00		
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 ▼ 50.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Daniel Mudd		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006	
Mailing Address 3542 Newark Street Northwest		Transaction ID: 47315-96877688169480	
City State Zip Code Washington DC 20016-3168	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation Information Requested		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

SUBTOTAL of Receipts This Page (optional) ▶	5050.00
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 76 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Robert Muir		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006
Mailing Address 522 Wedgewood Terrace		Transaction ID: 15548-37810915708542
City State Zip Code Metamora IL 61548-9062	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Retired	Occupation Patent Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Peter Mullen		Date of Receipt M M / D D / Y Y Y Y Y 03 / 07 / 2006
Mailing Address 19 Beechtree Lane		Transaction ID: 62287-09856814146041
City State Zip Code Bronxville NY 10708-1404	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Skadden, ARPS, Slate, Meagher & FLOM,	Occupation	
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) C. Jack Mullins		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006
Mailing Address 224 Ridgewood Drive		Transaction ID: 17590-50667971372604
City State Zip Code Victoria TX 77901-2572	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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	

SUBTOTAL of Receipts This Page (optional) ▶	1025.00
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 77 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Jack Mullins		Date of Receipt MM / DD / YYYY 03 / 16 / 2006
Mailing Address 224 Ridgewood Drive		Transaction ID: 17590-74099367856980
City Victoria	State TX	Zip Code 77901-2572
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 ▼ 350.00	

Full Name (Last, First, Middle Initial) B. John Murnane		Date of Receipt MM / DD / YYYY 03 / 02 / 2006
Mailing Address 10 Marian Place		Transaction ID: 85229-13485354185104
City Millwood	State NY	Zip Code 10546-1135
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Fitzpatrick, Cella, Harper and Scinto	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) C. Francis Murray		Date of Receipt MM / DD / YYYY 03 / 15 / 2006
Mailing Address 1310 Bayswater Avenue		Transaction ID: 16510-02135866880416
City Burlingame	State CA	Zip Code 94010-4313
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
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 ▼ 50.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
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 78 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Anthony Musillo		Date of Receipt M M / D D / Y Y Y Y Y 03 / 01 / 2006	
Mailing Address 7 Briarheath Ave		Transaction ID: 60860-79354494810105	
City Englishtown	State NJ	Zip Code 07726-2703	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer United States Arms	Occupation Customer Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Roger Nail		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2006	
Mailing Address 2415 N Potomac Street		Transaction ID: 85284-78812807798386	
City Arlington	State VA	Zip Code 22207-1025	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer AES, Corp.	Occupation Senior Vice President		
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) C. Freeman Nelson		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 17043 Tennyson Place		Transaction ID: 15548-09031313657760	
City Granada Hills	State CA	Zip Code 91344-1225	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Former Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
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 79 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Leslie Nesbitt

Mailing Address 12312 Red Hill Avenue

City State Zip Code
Santa Ana CA 92705-3202

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 ▼ 1.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2006

Transaction ID: 40974-52968996763229

Amount of Each Receipt this Period
1.00

Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Madeline Neumann

Mailing Address 726 Community Drive Apt.140

City State Zip Code
Belleville IL 62223-1026

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 ▼ 35.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 15 / 2006

Transaction ID: 16452-29006594419479

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Joseph Nicholas

Mailing Address 213 Forest Avenue

City State Zip Code
Altamonte Springs FL 32701-3671

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

Name of Employer Jim Kim Gall Enterprise Occupation Laborer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2006

Transaction ID: 47295-98545473814011

Amount of Each Receipt this Period
20.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	21.00
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 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Clayton Nielsen Mailing Address 4820 6 Mile Road City State Zip Code Racine WI 53402-9739 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-51862734556198 Amount of Each Receipt this Period 25.00
Name of Employer NBS Inc. Occupation Self Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Sheila Nolan Mailing Address 6411 Faustino Way City State Zip Code Sacramento CA 95831-1076 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006 Transaction ID: 60380-86358278989792 Amount of Each Receipt this Period 50.00
Name of Employer State of CA Department of Health Servi Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) John Normile Mailing Address 210 Harbour Pointe Way City State Zip Code West Palm Beach FL 33413-2087 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2006 Transaction ID: 60262-53890627622604 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	75.00
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 81 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address 1989 Fairview Avenue

City Rosville State MN Zip Code 55113-5427

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

Name of Employer Occupation None

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 35.00

Date of Receipt
MM / DD / YYYY
03 / 16 / 2006

Transaction ID: 17590-07241457700729

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Agnes Nuttman

Mailing Address 1619 Northeast 112th Avenue

City Vancouver State WA Zip Code 98684-4362

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt
MM / DD / YYYY
03 / 17 / 2006

Transaction ID: 19931-00234621763229

Amount of Each Receipt this Period
20.00

Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
John O'Brien

Mailing Address 24 Park Hill Drive # A2

City Albany State NY Zip Code 12204-2224

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 ▼ 200.00

Date of Receipt
MM / DD / YYYY
03 / 15 / 2006

Transaction ID: 16510-76769655942917

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	20.00
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 82 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Patricia O'Brien		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006	
Mailing Address 535 E 86th Street #20D		Transaction ID: 61021-89768618345261	
City State Zip Code New York NY 10028-7533	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unemployed	Occupation Computer Programmer		
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. Joe O'Donnell		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 15100 Interlachen Drive Apt. 118		Transaction ID: 17483-60738772153854	
City State Zip Code Silver Spring MD 20906-5602	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 ▼ 100.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Walter O'Neil		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2006	
Mailing Address 5212 King Charles Way		Transaction ID: 89851-57235354185104	
City State Zip Code Bethesda MD 20814	Amount of Each Receipt this Period 1.00		
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 ▼ 2.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	501.00
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 83 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Kathleen O'Regan

Mailing Address 2739 Kingston Road

City Northbrook State IL Zip Code 60062-6513

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

Name of Employer None Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
125.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 14 / 2006

Transaction ID: 76962-89474123716355

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Kent Oberg

Mailing Address 1508 N 29th Street

City Fort Dodge State IA Zip Code 50501-2148

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

Name of Employer Oberg Company Occupation Self-Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 15 / 2006

Transaction ID: 16510-10223025083541

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Jose Obregon Plaza

Mailing Address 10528 Northwest 32nd Place

City Miami State FL Zip Code 33147-1172

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 ▼
3.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 15 / 2006

Transaction ID: 16452-88569277524949

Amount of Each Receipt this Period
1.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	1.00
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 84 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Ray Oden		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2006
Mailing Address 702 Thora Boulevard		Transaction ID: 61045-39104861021042
City State Zip Code Shreveport LA 71106-1824	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 ▼ 500.00	

B. Full Name (Last, First, Middle Initial) Richard Odgers		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 5741 Enterprise Drive		Transaction ID: 47295-33178347349167
City State Zip Code Lincoln NE 68521-1000	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer United Methodist Church	Occupation Pastor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Robert Ofenloch		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006
Mailing Address 30 Morrill Hill Road		Transaction ID: 20121-28947085142135
City State Zip Code Andover NH 03216-3715	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Homemaker/Artist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	530.00
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 85 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Linda Ohlsen Mailing Address 3425 Christina Groves Lane City Lakeland State FL Zip Code 33813-3969 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47285-21838015317917 Amount of Each Receipt this Period 10.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Joseph Olin Mailing Address 4315 45th Street Apt. 2D City Long Island City State NY Zip Code 11104-2367 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47285-22471255064010 Amount of Each Receipt this Period 15.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Walter Ornot Mailing Address 251 9th Street Apt. 105 City Charleroi State PA Zip Code 15022-2122 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47295-15572756528854 Amount of Each Receipt this Period 5.00
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 ▼ 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 86 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
 Richard Otto
 Mailing Address 596 US Highway 395 N Unit 21
 City State Zip Code
Gardnerville NV 89410-7935
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2006
Transaction ID: 47285-56174868345261
 Amount of Each Receipt this Period
25.00
[MEMO ITEM]
 Earmarked for Friends of
 Kathy Salvi

B. Full Name (Last, First, Middle Initial)
 Donald Pabst
 Mailing Address 350 W Schaumburg Road Apt. A334
 City State Zip Code
Schaumburg IL 60194-3479
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006
Transaction ID: 17004-24451845884323
 Amount of Each Receipt this Period
1.00
 Earmarked for Friends of
 Kathy Salvi

C. Full Name (Last, First, Middle Initial)
 Richard Palmieri
 Mailing Address 1010 N Country Club Drive
 City State Zip Code
Schenectady NY 12309-5405
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Retired Registered Nurse
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 20.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2006
Transaction ID: 19931-14655703306198
 Amount of Each Receipt this Period
20.00
[MEMO ITEM]
 Earmarked for Friends of
 Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	1.00
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 87 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Shawn Paretti Mailing Address 100 Thatcher Drive City Slidell State LA Zip Code 70461-3912 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2006 Transaction ID: 87261-90314882993699 Amount of Each Receipt this Period 30.00
Name of Employer Claims Department Manager Occupation Lammico Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 30.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) George Parowski Mailing Address 588 Hoover Avenue City Township of Washin State NJ Zip Code 07676-4214 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2006 Transaction ID: 60380-06025332212448 Amount of Each Receipt this Period 20.00
Name of Employer Self Occupation Consultant Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Lawrence Patton Mailing Address 46 E Monroe Street City McAdoo State PA Zip Code 18237-1754 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-20890444517135 Amount of Each Receipt this Period 5.00
Name of Employer Self & Catholic Healthcare Audit Netwo Occupation Certified Public Accountant/Auditor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	50.00
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 88 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Irene Perish Mailing Address 320 3rd Street Southwest City State Zip Code Long Prairie MN 56347-1910 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-31109255552292 Amount of Each Receipt this Period 10.00
Name of Employer Occupation No Employer Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 20.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Tim Perri Mailing Address 4975 Southwest 65th Avenue City State Zip Code Portland OR 97221-1172 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006 Transaction ID: 47284-94930666685105 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Best Buy in Town, Inc. President Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Margaret Perry Mailing Address 1203 W 4th Street Apt. 624 City State Zip Code Tahlequah OK 74464-5020 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-2491135435104 Amount of Each Receipt this Period 50.00
Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 75.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 89 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Delancey Pestello		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 2127 Cross Key Drive		Transaction ID: 16452-52796572446823	
City State Zip Code San Antonio TX 78245-1938	Amount of Each Receipt this Period 10.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Houswife Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Pat Peters		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006	
Mailing Address 719 Tauomee Avenue		Transaction ID: 17005-81139773130417	
City State Zip Code Kansas City KS 66101-3023	Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Anh-Tuan Pham		Date of Receipt M M / D D / Y Y Y Y Y 03 / 03 / 2006	
Mailing Address 18410 Strathern Street		Transaction ID: 66762-23287600278854	
City State Zip Code Reseda CA 91335-1333	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 20.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	22.00
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 90 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Archie Phillipie		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006
Mailing Address 5964 Stockard Road		Transaction ID: 40974-42264956235886
City	State	Zip Code
Graham	NC	27253-8115
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2.00
Name of Employer	Occupation	Earmarked for Friends of Kathy Salvi
	Unemployed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00	

Full Name (Last, First, Middle Initial) B. Joan Pidgeon		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006
Mailing Address 33 Glenridge Drive		Transaction ID: 89510-70434206724167
City	State	Zip Code
Bedford	MA	01730-2009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer	Occupation	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Self	Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175.00	

Full Name (Last, First, Middle Initial) C. Greg Piepel		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address 649 Cherrywood Loop		Transaction ID: 19931-72411745786667
City	State	Zip Code
Richland	WA	99354-1807
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
Name of Employer	Occupation	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 70.00	

SUBTOTAL of Receipts This Page (optional)	▶	2.00
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 91 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Clarita Pinckney

Mailing Address 8601 Buckboard Drive

City State Zip Code
Alexandria VA 22308-2214

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

Name of Employer Occupation
Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 14 / 2006

Transaction ID: 76962-39039248228073

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Raymond Podmenik

Mailing Address 4342 Mystic Court

City State Zip Code
Las Cruces NM 88011-7537

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 19931-91482180356980

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Raymond Poggioli

Mailing Address 42 Iris Lane

City State Zip Code
New Hyde Park NY 11040-2124

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

Name of Employer Occupation
Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 20183-08849734067916

Amount of Each Receipt this Period
50.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	50.00
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 92 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Agnes Polasek		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006		
Mailing Address 869 Riverview Drive		Transaction ID: 17004-49471682310104		
City State Zip Code Plainwell MI 49080-1821	Amount of Each Receipt this Period 1.00		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C				
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 1.00			

Full Name (Last, First, Middle Initial) B. Robert Pusey		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006		
Mailing Address 1119 Alexandria Ave		Transaction ID: 76822-33738344907760		
City State Zip Code Alexandria VA 22308-1015	Amount of Each Receipt this Period 500.00			
FEC ID number of contributing federal political committee. C				
Name of Employer American Insurance Association Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Lobbyist Aggregate Year-to-Date ▼ 500.00			

Full Name (Last, First, Middle Initial) C. Wesley Rahe		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006		
Mailing Address 2050 Cannington Court		Transaction ID: 89510-89886111021042		
City State Zip Code Columbus OH 43229-5710	Amount of Each Receipt this Period 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C				
Name of Employer Metatec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Cd Rom Manufacturing Aggregate Year-to-Date ▼ 50.00			

SUBTOTAL of Receipts This Page (optional) ▶	501.00
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 93 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Travis Rankin		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 425 Alcatraz Avenue Apt. 1		Transaction ID: 17005-79946535825730
City State Zip Code Oakland CA 94609-1152	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer ABM Security Services	Occupation Security Guard	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) B. Kenneth Rasch		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 1834 Johnson Avenue RR #3		Transaction ID: 47295-39280337095261
City State Zip Code Fort Dodge IA 50501-8572	Amount of Each Receipt this Period 3.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3.00	

Full Name (Last, First, Middle Initial) C. Marian Reardon		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2006
Mailing Address 2113 S Lynn Street		Transaction ID: 76962-71067446470261
City State Zip Code Arlington VA 22202-2129	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Retired	Occupation Investor/Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional) ▶	3.00
TOTAL This Period (last page this line number only) ▶	3.00

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 94 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Andrej Remec		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 314 Oak Avenue		Transaction ID: 17590-02151125669479	
City Westmont	State IL	Amount of Each Receipt this Period 25.00	
Zip Code 60559-2019		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer Retired- Unemployed	Occupation Retired Chemical Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		
		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Ronald Rep		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 1504 129th Avenue Northwest		Transaction ID: 17845-25213259458542	
City Coon Rapids	State MN	Amount of Each Receipt this Period 25.00	
Zip Code 55448-4024		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Marion Reynolds		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 1120 S 8th Avenue		Transaction ID: 16452-15357607603073	
City Arcadia	State CA	Amount of Each Receipt this Period 7.00	
Zip Code 91006-4405		Amount of Each Receipt this Period 7.00	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7.00	
Name of Employer Retired	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 12.00		
		Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	32.00
TOTAL This Period (last page this line number only) ▶	32.00

**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 95 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Karen Reynoso Mailing Address 11170 Hercules Way City State Zip Code Mira Loma CA 91752-2013 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 03 / 2006 Transaction ID: 66762-85042971372605 Amount of Each Receipt this Period 50.00
Name of Employer Independent Contractor Occupation Environmental Consultant Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Craig Richardson Mailing Address 1610 Walden Drive City State Zip Code McLean VA 22101-3127 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2006 Transaction ID: 87515-78368777036667 Amount of Each Receipt this Period 500.00
Name of Employer Richardson Consulting, LLC Occupation Executive Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Marji Rodrigues Mailing Address 25409 W End Drive City State Zip Code Great Neck NY 11020-1020 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006 Transaction ID: 47295-16569155454635 Amount of Each Receipt this Period 10.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	550.00
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 96 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Raymond Rowe Mailing Address 49 E E Street City Encinitas State CA Zip Code 92024-3612 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-46641176939011 Amount of Each Receipt this Period 25.00
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 ▼ 75.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Joseph Rubino Mailing Address HC 1 Box 1A444 City Lackawaxen State PA Zip Code 18435-9722 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-94144839048386 Amount of Each Receipt this Period 25.00
Name of Employer Retired Occupation Broker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Marilyn Rubio Mailing Address 18814 Godinho Avenue City Cerritos State CA Zip Code 90703-6063 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-37766665220261 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 75.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	0.00
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 97 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Earl Runyon Mailing Address 936 Southwest 25th Street City Oklahoma City State OK Zip Code 73109-1615 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 40974-35627382993698 Amount of Each Receipt this Period <table border="1"> <tr> <td>1.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	0	6	1.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	5		2	0	0	6														
1.00																							
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 ▼ <table border="1"> <tr> <td>2.00</td> </tr> </table> Earmarked for Friends of Kathy Salvi	2.00																				
2.00																							

B. Full Name (Last, First, Middle Initial) Hector Salvatierra Mailing Address 11 W Medlock Drive City Phoenix State AZ Zip Code 85013-2044 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 17590-68033999204636 Amount of Each Receipt this Period <table border="1"> <tr> <td>200.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	6	200.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	6		2	0	0	6														
200.00																							
Name of Employer Self Occupation Business Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>200.00</td> </tr> </table> [MEMO ITEM] Earmarked for Friends of Kathy Salvi	200.00																				
200.00																							

C. Full Name (Last, First, Middle Initial) Raymond Salzman Mailing Address 3445 Everette Drive City Bowie State MD Zip Code 20716-1268 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 66762-30512636899948 Amount of Each Receipt this Period <table border="1"> <tr> <td>50.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	3		2	0	0	6	50.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		0	3		2	0	0	6														
50.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>200.00</td> </tr> </table> Earmarked for Friends of Kathy Salvi	200.00																				
200.00																							

SUBTOTAL of Receipts This Page (optional)	51.00
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 98 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Tom Sanders		Date of Receipt M M / D D / Y Y Y Y Y 03 / 06 / 2006
Mailing Address 9421 E Greenbriar Court		Transaction ID: 60380-86304873228073
City State Zip Code Wichita KS 67226-2172	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer V.A. Hospital	Occupation Association Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) B. Charles Sauder		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006
Mailing Address 3021 German Church Road		Transaction ID: 17004-75164431333542
City State Zip Code Mansfield OH 44904-8601	Amount of Each Receipt this Period 1.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1.00	

Full Name (Last, First, Middle Initial) C. Bill Saunders		Date of Receipt M M / D D / Y Y Y Y Y 03 / 27 / 2006
Mailing Address 3201 Wisconsin Avenue Northwest Ap		Transaction ID: 87515-29441469907760
City State Zip Code Washington DC 20016-3802	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) ▶	601.00
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 99 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address 357 Fair Avenue

City State Zip Code
Beaver PA 15009-2305

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: 89510-74467104673386

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Fred Scheigert

Mailing Address 123 S Pitt Street

City State Zip Code
Alexandria VA 22314-3111

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
03 / 02 / 2006

Transaction ID: 85284-10573977231979

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Allan Schmid

Mailing Address 1401 Plum Court Apt. A

City State Zip Code
Mount Prospect IL 60056-1048

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 ▼
5.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17590-36748903989792

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 100 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Arlene Schumacher		Date of Receipt MM / DD / YYYY 03 / 20 / 2006
Mailing Address 3921 Adamy Street		Transaction ID: 47295-73658388853073
City Columbus	State NE	Zip Code 68601-2987
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer Retired	Occupation Teacher	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

Full Name (Last, First, Middle Initial) B. Ann Schutt		Date of Receipt MM / DD / YYYY 03 / 13 / 2006
Mailing Address 3021 Chapel View Drive		Transaction ID: 89510-49378603696823
City Beltsville	State MD	Zip Code 20705-3429
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Montgomery County Public School	Occupation Teacher	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) C. Dorothy Schwartz		Date of Receipt MM / DD / YYYY 03 / 13 / 2006
Mailing Address 14814 N 37th Street		Transaction ID: 89510-52231997251511
City Phoenix	State AZ	Zip Code 85032-5281
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.00
Name of Employer	Occupation	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15.00	

SUBTOTAL of Receipts This Page (optional)	0.00
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 101 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Philip Schwartz Mailing Address 1504 New Abbey Avenue City Leesburg State FL Zip Code 34788-7667 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-24026125669479 Amount of Each Receipt this Period 1.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 1.00		

B. Full Name (Last, First, Middle Initial) Philip Seader Mailing Address 4821 E Paseo Luisa City Tucson State AZ Zip Code 85711-5301 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-29542177915573 Amount of Each Receipt this Period 25.00
Name of Employer Occupation City of Tucson Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 75.00		

C. Full Name (Last, First, Middle Initial) Anne Seebaugh Mailing Address 1195 Old Eustis Road City Mount Dora State FL Zip Code 32757-9448 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 20121-07123965024948 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Retired Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Aggregate Year-to-Date ▼ 75.00		

SUBTOTAL of Receipts This Page (optional)	▶	1.00
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 102 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mary Sexton		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 2021 King James Parkway Apt. 130B		Transaction ID: 40974-26571291685104
City State Zip Code Westlake OH 44145-3453	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
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 ▼ 25.00	

B. Full Name (Last, First, Middle Initial) Clarita Sgarbossa		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 408 Willow Street		Transaction ID: 17590-58597964048386
City State Zip Code Itasca IL 60143-1763	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer None	Occupation Housewife	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

C. Full Name (Last, First, Middle Initial) Robert Shalhoub		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006
Mailing Address 9325 Sibelius Drive		Transaction ID: 89510-93873232603074
City State Zip Code Vienna VA 22182-1632	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Retired	Occupation Retired M.D.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	

SUBTOTAL of Receipts This Page (optional) ▶	25.00
TOTAL This Period (last page this line number only) ▶	25.00

**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 103 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Robert Shaw		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006
Mailing Address 750 Linwood Street		Transaction ID: 47295-81924074888230
City Escondido State CA Zip Code 92027-4046	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Tipton Honda Occupation Sales Manager	Aggregate Year-to-Date ▼ 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) Laurie Shreeve		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006
Mailing Address 1200 Northwest 62nd Street		Transaction ID: 19931-67179507017136
City Vancouver State WA Zip Code 98663-1003	Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee. C		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Name of Employer Shreeve and Associates Occupation Business Owner	Aggregate Year-to-Date ▼ 10.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) Irene Sias		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2006
Mailing Address 451 Montclair Street		Transaction ID: 60380-99830263853074
City Chula Vista State CA Zip Code 91911-2514	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		Earmarked for Friends of Kathy Salvi
Name of Employer Occupation	Aggregate Year-to-Date ▼ 20.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	20.00
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 104 / 245
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Virginia Skinner Mailing Address 407 Aliso Drive Northeast City State Zip Code Albuquerque NM 87108-1006 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16452-36819094419479 Amount of Each Receipt this Period 1.00
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 ▼ 2.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Stephen Smaciarz Mailing Address 4025 Unity Avenue N City State Zip Code Minneapolis MN 55422-1718 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 40974-46313112974167 Amount of Each Receipt this Period 5.00
Name of Employer Safco Products Company Occupation Warehouseman-Production Crew Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) John Smith Mailing Address 4490 Blue Lake Road Northeast City State Zip Code Kalkaska MI 49646-9024 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-03843325376510 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	6.00
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 105 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Wm. Smith		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006	
Mailing Address PO Box 808		Transaction ID: 89510-04410952329635	
City New Castle	State NH	Amount of Each Receipt this Period 100.00	
Zip Code 03854-0808		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Retired	Aggregate Year-to-Date ▼ 100.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. George Snyder		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006	
Mailing Address 3012 S 72nd Avenue		Transaction ID: 16452-13760012388229	
City Omaha	State NE	Amount of Each Receipt this Period 20.00	
Zip Code 68124-3504		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Retired	Aggregate Year-to-Date ▼ 45.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked for Friends of Kathy Salvi		

Full Name (Last, First, Middle Initial) C. Rodney Spade		Date of Receipt M M / D D / Y Y Y Y Y 03 / 14 / 2006	
Mailing Address 119 Delancy Place		Transaction ID: 76962-69173830747605	
City Lancaster	State PA	Amount of Each Receipt this Period 50.00	
Zip Code 17601-7010		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation Computer Programmer	Aggregate Year-to-Date ▼ 50.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked for Friends of Kathy Salvi		

SUBTOTAL of Receipts This Page (optional) ▶	100.00
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 106 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Leonard Stahl		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006	
Mailing Address 840 Northwest 87th Avenue Apt. 505		Transaction ID: 40974-77622622251511	
City State Zip Code Miami FL 33172-3437	Amount of Each Receipt this Period 2.00		
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 ▼ 4.00		
		Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) B. Don Stahly		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006	
Mailing Address 3023 Clover Street		Transaction ID: 19931-84974306821823	
City State Zip Code Iowa City IA 52245-5111	Amount of Each Receipt this Period 20.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 20.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

Full Name (Last, First, Middle Initial) C. Fred Stamper		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006	
Mailing Address 13263 Sanders Hill Road		Transaction ID: 89510-51098269224167	
City State Zip Code Strykersville NY 14145-9402	Amount of Each Receipt this Period 15.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 15.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	

SUBTOTAL of Receipts This Page (optional) ▶	2.00
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 107 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Mary Stanley Mailing Address 28 Olde Stone Lane City Lancaster State NY Zip Code 14086-2636 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 16510-18062990903854 Amount of Each Receipt this Period 10.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Catherine Steffens Mailing Address 300 High Avenue City Nyack State NY Zip Code 10960-2448 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 15 / 2006 Transaction ID: 40974-42971438169479 Amount of Each Receipt this Period 25.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25.00	Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) David Stevens Mailing Address 62782 E Amberwood Drive City Tucson State AZ Zip Code 85739-1833 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-32799929380417 Amount of Each Receipt this Period 5.00
Name of Employer Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	25.00
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 108 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Paul Stoner		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 2010 Sterling Pointe Court		Transaction ID: 17590-57387942075729	
City State Zip Code League City TX 77573-3933	Amount of Each Receipt this Period 100.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation NASA Physician	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. John Strong		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006	
Mailing Address 307 W 8th Street		Transaction ID: 17590-04023379087448	
City State Zip Code Holtville CA 92250-1163	Amount of Each Receipt this Period 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Name of Employer Occupation	Aggregate Year-to-Date ▼ 200.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Alice Strzalka		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2006	
Mailing Address 1218 Michigan Avenue		Transaction ID: 87214-89023989439011	
City State Zip Code Manitowoc WI 54220-3240	Amount of Each Receipt this Period 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Retired Retired	Aggregate Year-to-Date ▼ 10.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 109 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Viola Sultan

Mailing Address 329 W River Street

City State Zip Code
Bourbonnais IL 60914-1837

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17004-27029055356979

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Mary Sundy

Mailing Address 45 Fordyce Manor Court

City State Zip Code
Lake St. Louis MO 63367-1800

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

Name of Employer Occupation
None Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 16 / 2006

Transaction ID: 17483-75480288267136

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Wayne Sunman

Mailing Address 5463 Mansfield Avenue

City State Zip Code
Sterling Heights MI 48310-5745

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2006

Transaction ID: 89510-21334475278854

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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 110 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

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

Mailing Address PO Box 314

City State Zip Code
Mount Prospect IL 60056-0314

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 ▼ 100.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 23 / 2006

Transaction ID: 32416-89538210630417

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

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

Mailing Address 6550 Parkway E

City State Zip Code
Harrisburg PA 17112-1231

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

Name of Employer Nutrition Inc. Occupation Food Service

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 30.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 89510-44532412290573

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Charles Tautkus

Mailing Address 63 Spruce Street

City State Zip Code
Abington MA 02351-1408

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 ▼ 85.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 13 / 2006

Transaction ID: 89510-25046938657760

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	0.00
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 111 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. James Teeter		Date of Receipt MM / DD / YYYY 03 / 27 / 2006
Mailing Address 531 I Avenue		Transaction ID: 87515-14713686704635
City Coronado	State CA	Zip Code 92118-1637
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer Mesa Label Express, Inc.	Occupation Engineer/Chief Financial Officer	
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. Martin Thalmayr		Date of Receipt MM / DD / YYYY 03 / 13 / 2006
Mailing Address 3934 65th Street		Transaction ID: 89510-52621096372604
City Woodside	State NY	Zip Code 11377-3638
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
Name of Employer	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 40.00	
[MEMO ITEM] Earmarked for Friends of Kathy Salvi		

Full Name (Last, First, Middle Initial) C. Agnes Timcheck		Date of Receipt MM / DD / YYYY 03 / 13 / 2006
Mailing Address 800 4th Street Southwest Apt. S302		Transaction ID: 89510-32925051450729
City Washington	State DC	Zip Code 20024-3012
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 20.00	
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 ▼ 35.00	
[MEMO ITEM] Earmarked for Friends of Kathy Salvi		

SUBTOTAL of Receipts This Page (optional)	▶	500.00
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 112 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. John Timlin		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 415 N Thomas Street		Transaction ID: 16510-04487246274948
City State Zip Code Arlington VA 22203-3111	Amount of Each Receipt this Period 25.00	
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 ▼ 85.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) B. Ann Tittle		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006
Mailing Address 271 N Albany Avenue Apt. 10		Transaction ID: 17004-39910525083542
City State Zip Code Chicago IL 60612-1870	Amount of Each Receipt this Period 2.00	
FEC ID number of contributing federal political committee. C		
Name of Employer St. Genevive's Occupation Music Minister		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2.00	Earmarked for Friends of Kathy Salvi

Full Name (Last, First, Middle Initial) C. Mary Townsend		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2006
Mailing Address 3033 Nutwood Cr Cedarwood		Transaction ID: 47295-41381472349167
City State Zip Code Jamestown NC 27282	Amount of Each Receipt this Period 60.00	
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 ▼ 110.00	Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ▶	62.00
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 113 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) John Trazino Mailing Address 8 Trazino Drive City Monroe State NY Zip Code 10950-4571 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 17590-75928896665573 Amount of Each Receipt this Period <table border="1"> <tr> <td>4.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	6	4.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	6		2	0	0	6														
4.00																							
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 ▼ <table border="1"> <tr> <td>4.00</td> </tr> </table>		4.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi																				
4.00																							

B. Full Name (Last, First, Middle Initial) Charles Trieble Mailing Address 1022 E Gondola Drive City Venice State FL Zip Code 34293-1217 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 17004-74259585142136 Amount of Each Receipt this Period <table border="1"> <tr> <td>25.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	6	25.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	6		2	0	0	6														
25.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>25.00</td> </tr> </table>		25.00	Earmarked for Friends of Kathy Salvi																				
25.00																							

C. Full Name (Last, First, Middle Initial) Jean Tukianen Mailing Address 1800 South Drive City Lake Worth State FL Zip Code 33461-6133 FEC ID number of contributing federal political committee. C		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table> Transaction ID: 17590-65700930356980 Amount of Each Receipt this Period <table border="1"> <tr> <td>10.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	0	6	10.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	3		1	6		2	0	0	6														
10.00																							
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>10.00</td> </tr> </table>		10.00	[MEMO ITEM] Earmarked for Friends of Kathy Salvi																				
10.00																							

SUBTOTAL of Receipts This Page (optional)	▶	<table border="1"><tr><td>25.00</td></tr></table>	25.00
25.00			
TOTAL This Period (last page this line number only)	▶	<table border="1"><tr><td></td></tr></table>	

**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 114 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Margaret Tumminia Mailing Address 8011 Mainsail Drive City Rohnert Park State CA Zip Code 94928-8186 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2006 Transaction ID: 17590-42127627134323 Amount of Each Receipt this Period 10.00
Name of Employer: Glaxo Smith Kline Occupation: Sales Representative Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Billy Turner Mailing Address PO Box 182 City Arlington State OH Zip Code 45814-0182 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-90122622251511 Amount of Each Receipt this Period 25.00
Name of Employer: Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 25.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Nancy Uhlman Mailing Address 1375 Corte Loma City Walnut Creek State CA Zip Code 94598-2903 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006 Transaction ID: 15548-32474917173385 Amount of Each Receipt this Period 75.00
Name of Employer: None Occupation: Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 75.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	25.00
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 115 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Fernando Vela

Mailing Address 760 El Sombroso Drive

City San Jose State CA Zip Code 95123-3923

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 ▼ 25.00

Date of Receipt
03 / 15 / 2006

Transaction ID: 16510-73049563169480

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Philip Velthuis

Mailing Address 7115 Counter Place

City Burke State VA Zip Code 22015-4410

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20.00

Date of Receipt
03 / 13 / 2006

Transaction ID: 89510-93319338560105

Amount of Each Receipt this Period
20.00

[MEMO ITEM]
Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Eugene Vigil

Mailing Address 2695 Big Oaks Dr SW

City Marietta State GA Zip Code 30064-2503

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25.00

Date of Receipt
03 / 06 / 2006

Transaction ID: 60380-94547671079636

Amount of Each Receipt this Period
25.00

Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	25.00
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 116 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Francis Volpe		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006		
Mailing Address 30 Avenue Ehrbar Apt. F315		Transaction ID: 16452-02155703306198		
City State Zip Code Mount Vernon NY 10552	Amount of Each Receipt this Period 2.00		Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C				
Name of Employer Retired Occupation Retired	Aggregate Year-to-Date ▼ 3.00			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

B. Full Name (Last, First, Middle Initial) Arnold Wagner		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006		
Mailing Address 2524 the Strand		Transaction ID: 16452-61159914731979		
City State Zip Code Northbrook IL 60062-6546	Amount of Each Receipt this Period 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation	Aggregate Year-to-Date ▼ 25.00			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

C. Full Name (Last, First, Middle Initial) Josephine Wagner		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2006		
Mailing Address 7321 Branch Street		Transaction ID: 87491-24462527036667		
City State Zip Code Hollywood FL 33024-5421	Amount of Each Receipt this Period 20.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi	
FEC ID number of contributing federal political committee. C				
Name of Employer Medical Tech. Services Occupation Registered Nurse	Aggregate Year-to-Date ▼ 20.00			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

SUBTOTAL of Receipts This Page (optional) ▶	2.00
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 117 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) John Wakelin Mailing Address 12827 Rockwell Court City Poway State CA Zip Code 92064-3835 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 89510-63195437192917 Amount of Each Receipt this Period 50.00
Name of Employer: Science Application International Corp Occupation: Program Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Thomas Weaver Mailing Address 216 Query Street City New Bedford State MA Zip Code 02745-5255 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2006 Transaction ID: 76769-03590029478073 Amount of Each Receipt this Period 5.00
Name of Employer: Occupation: Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5.00		Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial) Jerry Webb Mailing Address 2782 Creekwood Drive City Cantonment State FL Zip Code 32533-7505 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2006 Transaction ID: 19931-19265383481979 Amount of Each Receipt this Period 50.00
Name of Employer: Webb Electric Company, Inc. Occupation: Manager Electrical Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	55.00
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 118 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Stanley Weber		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 3082 Bolgos Circle		Transaction ID: 16510-13914126157760 Amount of Each Receipt this Period 10.00
City State Zip Code Ann Arbor MI 48105-1513		
FEC ID number of contributing federal political committee. C		
Name of Employer Michigan Family Independence Agency	Occupation Caseworker	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00	

Full Name (Last, First, Middle Initial) B. Walter Wedding		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 808 Adams Street		Transaction ID: 16510-77260988950730 Amount of Each Receipt this Period 5.00
City State Zip Code Saginaw MI 48602-2132		
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5.00	

Full Name (Last, First, Middle Initial) C. Thomas White		Date of Receipt M M / D D / Y Y Y Y 03 / 15 / 2006
Mailing Address 19 Lady Slipper Lane		Transaction ID: 16510-23850649595260 Amount of Each Receipt this Period 10.00
City State Zip Code Langhorne PA 19047-3420		
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	[MEMO ITEM] Earmarked for Friends of Kathy Salvi
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10.00	

SUBTOTAL of Receipts This Page (optional) ▶	0.00
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 119 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Steven Whitehead		Date of Receipt M M / D D / Y Y Y Y Y 03 / 13 / 2006
Mailing Address 809 Ridge Place		Transaction ID: 89510-58895510435104
City Falls Church	State VA	Zip Code 22046-3631
Amount of Each Receipt this Period 50.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
FEC ID number of contributing federal political committee. C		
Name of Employer Sallie Mac	Occupation Application Processing Spec 1	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 75.00	

Full Name (Last, First, Middle Initial) B. Kirby Wilbur		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2006
Mailing Address 14924 283rd Place Northeast		Transaction ID: 60380-51855105161667
City Duvall	State WA	Zip Code 98019-8165
Amount of Each Receipt this Period 100.00		Earmarked for Friends of Kathy Salvi
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 ▼ 100.00	

Full Name (Last, First, Middle Initial) C. Rita Wilhelm- Rigney		Date of Receipt M M / D D / Y Y Y Y Y 03 / 20 / 2006
Mailing Address 37 Lakeview Acres Drive		Transaction ID: 47285-95104616880417
City Collinsville	State IL	Zip Code 62234-5411
Amount of Each Receipt this Period 25.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi
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 ▼ 25.00	

SUBTOTAL of Receipts This Page (optional) ▶	100.00
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 120 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Roland Wilkinson

Mailing Address 5473 Pelican Way

City St. Augustine State FL Zip Code 32080-7153

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 ▼ 50.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 15 / 2006

Transaction ID: 16510-56100100278854

Amount of Each Receipt this Period
 25.00

[MEMO ITEM]
 Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Mary Wolf

Mailing Address 1112 Plymouth Avenue Southeast

City Grand Rapids State MI Zip Code 49506-6528

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

Name of Employer Housewife Occupation Homemaker

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 50.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 16 / 2006

Transaction ID: 17483-97527712583542

Amount of Each Receipt this Period
 50.00

[MEMO ITEM]
 Earmarked for Friends of Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Grace Wolff

Mailing Address 1341 Blue Road

City Coral Gables State FL Zip Code 33146-1156

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

Name of Employer University of Miami Occupation Doctor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 22 / 2006

Transaction ID: 87234-54024904966354

Amount of Each Receipt this Period
 50.00

[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional)	▶	0.00
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 121 / 245
(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Susan Wright

Mailing Address 955 Cressman Road

City State Zip Code
Schwenksville PA 19473-2115

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 17 / 2006

Transaction ID: 18873-96336001157761

Amount of Each Receipt this Period
10.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

B. Full Name (Last, First, Middle Initial)
Philip Yancey

Mailing Address 1213 Rake Avenue

City State Zip Code
Frankfort KY 40601-4346

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 22 / 2006

Transaction ID: 87234-99666994810105

Amount of Each Receipt this Period
15.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

C. Full Name (Last, First, Middle Initial)
Craig Yoder

Mailing Address 18294 Chaucer Lane

City State Zip Code
South Bend IN 46637-4311

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 21 / 2006

Transaction ID: 49236-17933291196823

Amount of Each Receipt this Period
7.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

SUBTOTAL of Receipts This Page (optional) ► **0.00**

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 122 / 245
	<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial) Kathryn Yoder Mailing Address 15702 Blackburn Street City Accokeek State MD Zip Code 20607-9512 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6 Transaction ID: 76962-96018618345261 Amount of Each Receipt this Period 25.00
Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		[MEMO ITEM] Earmarked for Friends of Kathy Salvi

B. Full Name (Last, First, Middle Initial) Kathryn Yoder Mailing Address 15702 Blackburn Street City Accokeek State MD Zip Code 20607-9512 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6 Transaction ID: 76962-56884402036667 Amount of Each Receipt this Period 200.00
Name of Employer N/A Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		

C. Full Name (Last, First, Middle Initial) Stephen Zaleski Mailing Address 832 Benskin Avenue Southwest City Canton State OH Zip Code 44710-1440 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6 Transaction ID: 17004-41198366880417 Amount of Each Receipt this Period 5.00
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 ▼ 5.00		Earmarked for Friends of Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	205.00
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 123 / 245
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Full Name (Last, First, Middle Initial)
Marion Zarzeczna

Mailing Address 500 Centre Street

City State Zip Code
Trenton NJ 08611-3018

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
40.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	5	/	2	0	0	6

Transaction ID: 16452-81658571958542

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Earmarked for Friends of
Kathy Salvi

SUBTOTAL of Receipts This Page (optional)	▶	0.00
TOTAL This Period (last page this line number only)	▶	27198.00

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 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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Four Star Printing		Transaction ID: V63675-9665490984916 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 8455-R Tyco Rd.		Amount of Each Disbursement this Period 252.36
City Vienna State VA Zip Code 22182	001 Category/ Type	
Purpose of Disbursement Printing Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Full Name (Last, First, Middle Initial) B. Integram		Transaction ID: V63675-4694177508354 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 1573.68
City Fairfax State VA Zip Code 22031	001 Category/ Type	
Purpose of Disbursement Mailshop Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Full Name (Last, First, Middle Initial) C. Integram		Transaction ID: V64174-7757226824760 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 800.80
City Fairfax State VA Zip Code 22031	001 Category/ Type	
Purpose of Disbursement Postage Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

2626.84

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Integram Full Name (Last, First, Middle Initial) Mailing Address 8421 Hilltop Road City Fairfax State VA Zip Code 22031 Purpose of Disbursement Postage 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) ▼		Transaction ID: V64174-2415124773979 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 Amount of Each Disbursement this Period: 65.13 Category/Type: 001
B. SunTrust Full Name (Last, First, Middle Initial) Mailing Address PO Box 85024 City Alexandria State VA Zip Code 23285 Purpose of Disbursement Bank Fee 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) ▼		Transaction ID: 64174-97961062192917 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period: 0.68 Category/Type: 001
C. SunTrust Full Name (Last, First, Middle Initial) Mailing Address PO Box 85024 City Alexandria State VA Zip Code 23285 Purpose of Disbursement Bank fee 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) ▼		Transaction ID: 64174-18743532896042 Date of Disbursement: M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 6 Amount of Each Disbursement this Period: 30.40 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ► 96.21

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. SunTrust		Transaction ID: 64174-49865359067917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 6
Mailing Address PO Box 85024		Amount of Each Disbursement this Period 35.00
City Alexandria State VA Zip Code 23285	001 Category/ Type	
Purpose of Disbursement Bank Fee		
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. SunTrust		Transaction ID: 64174-47094362974167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 6
Mailing Address PO Box 85024		Amount of Each Disbursement this Period 5.00
City Alexandria State VA Zip Code 23285	001 Category/ Type	
Purpose of Disbursement Bank Fee		
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) C. SunTrust		Transaction ID: 64174-09954470396041 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 85024		Amount of Each Disbursement this Period 0.84
City Alexandria State VA Zip Code 23285	001 Category/ Type	
Purpose of Disbursement Bank Fee		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	40.84
TOTAL 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 127 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. SunTrust</p> <p>Full Name (Last, First, Middle Initial) SunTrust</p> <p>Mailing Address PO Box 85024</p> <p>City Alexandria State VA Zip Code 23285</p> <p>Purpose of Disbursement Bank Fee 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>Transaction ID: 64174-19939821958542</p> <p>Date of Disbursement 03 / 15 / 2006</p> <p>Amount of Each Disbursement this Period 6.00</p> <p>001 Category/Type</p>
<p>B. SunTrust</p> <p>Full Name (Last, First, Middle Initial) SunTrust</p> <p>Mailing Address PO Box 85024</p> <p>City Alexandria State VA Zip Code 23285</p> <p>Purpose of Disbursement Bank Fee 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>Transaction ID: 64174-04998415708541</p> <p>Date of Disbursement 03 / 20 / 2006</p> <p>Amount of Each Disbursement this Period 6.50</p> <p>001 Category/Type</p>
<p>C. SunTrust</p> <p>Full Name (Last, First, Middle Initial) SunTrust</p> <p>Mailing Address PO Box 85024</p> <p>City Alexandria State VA Zip Code 23285</p> <p>Purpose of Disbursement Bank Fee 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>Transaction ID: 64174-88683718442917</p> <p>Date of Disbursement 03 / 28 / 2006</p> <p>Amount of Each Disbursement this Period 6.00</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ► 18.50

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. SunTrust</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 85024</p> <p>City Alexandria State VA Zip Code 23285</p> <p>Purpose of Disbursement Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: 64174-22748965024948</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="62.40"/></p>
<p>B. Susan B. Anthony List</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address 1420 King Street Suite 550</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement List Rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>		<p>Transaction ID: V63675-1846734881401</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="209.24"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Democracy Data & Communications		Transaction ID: V66430-2814294695854
Mailing Address 1029 North Royal Street		Date of Disbursement MM / DD / YYYY 03 / 02 / 2006
City Alexandria	State VA	Amount of Each Disbursement this Period 30.77
Zip Code 22314		
Purpose of Disbursement E-mails	Category/Type 011	In-Kind
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 08	

Full Name (Last, First, Middle Initial) B. Four Star Printing		Transaction ID: V63675-5848962664604
Mailing Address 8455-R Tyco Rd.		Date of Disbursement MM / DD / YYYY 03 / 08 / 2006
City Vienna	State VA	Amount of Each Disbursement this Period 252.36
Zip Code 22182		
Purpose of Disbursement Printing	Category/Type 011	In-Kind
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 08	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E3902-80002993345261
Mailing Address PO Box 7		Date of Disbursement MM / DD / YYYY 03 / 01 / 2006
City Wauconda	State IL	Amount of Each Disbursement this Period 10.00
Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check	Category/Type 011	[MEMO ITEM] Earmarked by Laurel Arnold
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 08	

SUBTOTAL of Disbursements This Page (optional)	283.13
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E3902-18465822935104 Date of Disbursement 03 / 01 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
Earmarked by Michael Kell-ogg

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E030106-C00414037 Date of Disbursement 03 / 01 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 334.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E5336-57987612485886 Date of Disbursement 03 / 01 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 75.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]
Earmarked by Thomas & Marianne Lacey

SUBTOTAL of Disbursements This Page (optional) ▶	334.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E5336-39435976743698 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by J. R. Hall
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E5336-58767336606979 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Charles Hans- en
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E5336-00446718931198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Billy Valent- ine
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E5336-72517031431198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 199.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Christopher Kingsley	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B0860-96166628599167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Kristin Gorak	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B0860-79354494810105 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Anthony Musillo	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E030606-C00414037 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2530.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E5229-13485354185104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1000.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E5293-54624575376511 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 250.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
Earmarked by John Murnane

[MEMO ITEM]
Earmarked by Ernest Bottom

SUBTOTAL of Disbursements This Page (optional) ► 2530.00

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)

PAGE 134 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E6762-10184878110885</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Earmarked by Paul Chavez</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E7141-88222903013230</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] Earmarked by Dorothy Bertucci</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E7141-77117556333542</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p> <p>[MEMO ITEM] Earmarked by Stephen Hubbell</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7141-92443484067917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Corey Darr
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0380-92223757505417 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Cora Leenheer
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0380-79339236021042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Kelly Aguayo
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0380-86358278989792 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Sheila Nolan
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type 011		
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0380-06025332212448 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by George Parowski
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type 011		
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0380-51855105161667 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Kirby Wilbur
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0380-20536440610885 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Jean Mosher
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0380-34775942564010 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Clayton Croy
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0380-68616884946823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Mary Christensen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0380-77784365415573 Date of Disbursement 03 / 06 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Edward Gehri-nger
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0380-99830263853074 Date of Disbursement 03 / 06 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Irene Sias
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0380-99337404966355 Date of Disbursement 03 / 06 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Carol Knox

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6762-85467165708542 Date of Disbursement 03 / 06 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Lorraine McGlynn
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6762-30512636899948 Date of Disbursement 03 / 06 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Raymond Salzman
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6762-85042971372605 Date of Disbursement 03 / 06 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Karen Reynoso

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

PAGE 140 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E6762-30813235044479</p> <p>Date of Disbursement 03 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Earmarked by James Bonner</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E6762-23287600278854</p> <p>Date of Disbursement 03 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM] Earmarked by Anh-Tuan Pham</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E0380-94547671079636</p> <p>Date of Disbursement 03 / 06 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Eugene Vigil</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0380-86304873228073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Tom Sanders
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0380-45415896177292 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Pirooz Abir
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0380-59836977720261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Zoraida Corn-ejo
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E0380-31010073423385</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 6 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Earmarked by Kim Foster</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B0275-48804873228073</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period 10.00</p> <p>[MEMO ITEM] Earmarked by John Hartford</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-21334475278854</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Earmarked by Wayne Sunman</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-00835818052291 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by N. Adamson
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-97814577817917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 3.00 [MEMO ITEM] Earmarked by S. Bourdon
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-51098269224167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Fred Stamper
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-49378603696823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 200.00 [MEMO ITEM] Earmarked by Ann Schutt
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-32925051450729 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Agnes Timcheck
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-91654604673386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Jerome Kohel
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-49477785825729 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by John Bachman
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-16506594419479 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00 [MEMO ITEM] Earmarked by John Gregory
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-74467104673386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Joseph Sayre
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-42445009946823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Elizabeth Da-ly
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-69500368833542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00 [MEMO ITEM] Earmarked by Barry Katz
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-29542177915573 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Philip Seader
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-52231997251511 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Dorothy Schwartz
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-83768862485886 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Robert Follett
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-58895510435104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Steven Whitehead
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-31124514341354</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5.00"/></p> <p>[MEMO ITEM] Earmarked by Patricia Kohl</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-93319338560105</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.00"/></p> <p>[MEMO ITEM] Earmarked by Philip Velthuis</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-93873232603074</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by Robert Shalhou</p>

SUBTOTAL of Disbursements This Page (optional)

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-37704104185104</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM] Earmarked by John Grogan</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-46641176939011</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by Raymond Rowe</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-92956179380417</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p> <p>[MEMO ITEM] Earmarked by Larry King</p>

SUBTOTAL of Disbursements This Page (optional)

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9510-89886111021042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Wesley Rahe
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9510-70434206724167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Joan Pidgeon
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9510-44532412290573 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Karen Sweeth-eimer
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-63389223814011</p> <p>Date of Disbursement 03 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Joseph Hopfner</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-25046938657760</p> <p>Date of Disbursement 03 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Charles Tautkus</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9510-52621096372604</p> <p>Date of Disbursement 03 / 14 / 2006</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM] Earmarked by Martin Thalmayr</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B9510-35140627622604
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011
Category/
Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]
Earmarked by A. Christopher

B. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B9510-04793947935104
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

30.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011
Category/
Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]
Earmarked by Russell Haas

C. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B9510-64376467466355
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	6

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

25.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011
Category/
Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]
Earmarked by Shirley Cross

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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

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**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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9851-90664309263230 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Patricia Broderick
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6807-87098330259323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Patricia Cro-ke
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6962-39039248228073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Clarita Pinc-kney
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6962-89474123716355 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6962-96018618345261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6962-68531435728073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6962-21679323911667 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by John Barry
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6962-99174135923386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Mary Corr
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6962-71067446470261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Marian Reardon
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6962-79079836606980 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type [MEMO ITEM] Earmarked by Thomas Mills
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6962-91810244321824 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type [MEMO ITEM] Earmarked by Frances McCl- oskey
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6962-69173830747605 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type [MEMO ITEM] Earmarked by Rodney Spade

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6962-53786867856979 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by James Balmes
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E031406-C00414037 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1569.00 [MEMO ITEM] Earmarked by Tim Burke	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			011 Category/Type

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0141-43494814634323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Tim Burke	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1569.00
TOTAL 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)

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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

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0262-29545229673385 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Daniel Duncan
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0262-53890627622604 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by John Normile
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9851-57235354185104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Walter O'Neil
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9510-58033388853073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Richard McDonald
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9510-70985049009323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Edna Lehmann
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9510-66833132505417 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Kenneth Carlson

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9510-79056948423386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by James Bliss
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9510-07311648130416 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by John Macejka
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9510-53083437681198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 8.00 [MEMO ITEM] Earmarked by Lucy Brewer
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9510-91007632017136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Desmond McNelis
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9510-45286196470261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Clifton Morris
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9510-63195437192917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by John Wakelin
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9510-06245058774948 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Herb Mattingly	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9510-70397585630417 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Rita Matarese	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9510-04410952329635 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Wm. Smith	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9510-22320193052292 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Clara Allen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9510-39442080259323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Thomas Hoesl
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9510-13215273618698 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Blanche Deane
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6769-03590029478073 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check 011 Category/Type	[MEMO ITEM] Earmarked by Thomas Weaver	
Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6962-76916140317917 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check 011 Category/Type	[MEMO ITEM] Earmarked by Albert Fried- rich	
Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6962-44991701841354 Date of Disbursement 03 / 14 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1000.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check 011 Category/Type	[MEMO ITEM] Earmarked by Giuseppe Cec- chi	
Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B5548-09814089536666 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Carole Gangloff	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-90380495786667 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Ann Debrates	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B5548-09031313657760 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Freeman Nelson	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B5548-32474917173385 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 75.00 [MEMO ITEM] Earmarked by Nancy Uhlman
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-31109255552292 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Irene Perish
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-15702456235885 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Charles Buc- ka
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-72878664731980 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-56100100278854 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-37766665220261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-04487246274948 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by John Timlin
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-29211062192917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 75.00 [MEMO ITEM] Earmarked by John Keane
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-76769655942917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by John O'Brien
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-41906374692917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Greg Hamblen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-53257387876511 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Brian Jackson
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6452-51862734556198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Clayton Nielsen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6452-61159914731979 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Arnold Wagner
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	011 Category/Type	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-68575686216355 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Thomas Eaton
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	011 Category/Type	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-14944094419479 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Mary McMonagle
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	011 Category/Type	
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-09138125181198 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Jeanne Lazar
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-63918703794480 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Joseph Koch
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-73049563169480 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Fernando Vela

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-13914126157760 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-78763979673386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-10223025083541 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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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

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-53309267759323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-03693789243698 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-72082155942917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s)
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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-54862612485886 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 75.00 [MEMO ITEM] Earmarked by Wilbur Bolton
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-45403689146042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Helen Farson
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-27019900083542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Steve Laughlin
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-02135866880416 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Francis Murray
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-94144839048386 Date of Disbursement 03 / 16 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Joseph Rubino	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-32883852720260 Date of Disbursement 03 / 16 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Walter Kobialka	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-28718203306198 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 4.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Maurice Friedman
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-71979922056198 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Kent Bettale
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-77260988950730 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Walter Wedding

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-69314211606980 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Michael Kessler
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-18062990903854 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Mary Stanley
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6452-60291689634323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Doris Avilla
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-84211367368698 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Waldemar Has-elbarth
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6510-23850649595260 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Thomas White
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6510-64484804868698 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Eula Colegro-ve

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-87719362974167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Agnes Hansen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-15765017271042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Frederick Mc-Nicholl
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B5548-35721987485885 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Chris Currie
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B6452-81658571958542</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Marion Zarze- czna</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B6452-29006594419479</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>[MEMO ITEM] Earmarked by Madeline Neu- mann</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B6452-13760012388229</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>[MEMO ITEM] Earmarked by George Snyder</p>

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6452-52796572446823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Delancey Pestello
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6452-72768801450730 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Gerald Harold
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B6452-67472475767136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Daniel Lieuwen

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7004-73106020689011 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Patrick Foy
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7004-27029055356979 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Viola Sultan
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7004-63021486997605 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Brian Carmody
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B7004-09739321470260
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	6	

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011

Category/Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]

Earmarked by Henry Morrissey

B. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B7483-05743044614791
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	6	

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

100.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011

Category/Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]

Earmarked by Jane Geldermann

C. Friends of Kathy Salvi
Full Name (Last, First, Middle Initial)
Transaction ID: B7483-97527712583542
Date of Disbursement

Mailing Address PO Box 7

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	6	

City Wauconda State IL Zip Code 60084

Amount of Each Disbursement this Period

50.00

Purpose of Disbursement Transmitted by Contributor's Original Ch

011

Category/Type

Candidate Name Kathleen Salvi

Office Sought: House Senate President

Disbursement For: 2006 Primary General Other (specify) ▼

State: IL District: 08

[MEMO ITEM]

Earmarked by Mary Wolf

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

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**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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7483-94553774595261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1000.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7483-75480288267136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-32270449399948 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-17135256528854 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Albert Geimer
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-75230044126511 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Mary Boushor
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-67373293638230 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Stanley Koln- iak

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-09682863950729 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Kenneth Lark-in
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-48963564634323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Robert Cosgrove
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-65700930356980 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Jean Tukianen
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-37093752622604</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p> <p>[MEMO ITEM] Earmarked by Mary Cull</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-03977602720260</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] Earmarked by R. Hausman</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-91148012876511</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] Earmarked by Nicholas Lal-ly</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-96236819028855 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Martha Finck
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-90095156431199 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Agnes Hayden
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-42127627134323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Margaret Tum- minia
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-36748903989792</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>[MEMO ITEM] Earmarked by Allan Schmid</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-68119448423386</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>[MEMO ITEM] Earmarked by Lela Jackson</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-32799929380417</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>[MEMO ITEM] Earmarked by David Stevens</p>

SUBTOTAL of Disbursements This Page (optional) **0.00**

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**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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-7592889666573 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 4.00 [MEMO ITEM] Earmarked by John Trazino
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-69042605161667 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by John Duane
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-67412966489792 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 6.00 [MEMO ITEM] Earmarked by Marcia Barnard
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-20890444517135 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-68033999204636 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 200.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-04023379087448 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-24911135435104</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>[MEMO ITEM] Earmarked by Margaret Perry</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-57387942075729</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Earmarked by Paul Stoner</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7590-50667971372604</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>[MEMO ITEM] Earmarked by Jack Mullins</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-02151125669479 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Andrej Remec
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-07241457700729 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Joseph Novotny
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7590-58597964048386 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Clarita Sgarbossa
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7590-98022097349167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Chris Fotias
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7590-54992312192917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Roland Canepa
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E031606-C00414037 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 757.00
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶

757.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E0974-62978762388230</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 1.00</p> <p>[MEMO ITEM] Earmarked by Wade Goss</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E0974-42971438169479</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Catherine St-effens</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E0974-26571291685104</p> <p>Date of Disbursement 03 / 16 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Mary Sexton</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0974-52968996763229 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Leslie Nesbitt	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 011

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0974-77622622251511 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Leonard Stahl	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 011

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0974-73843020200730 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Duane Haugan	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0974-35627382993698 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Earl Runyon
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0974-69215029478073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Jean Babeaux
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0974-46313112974167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Stephen Smaciarz
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0974-42264956235886 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00 [MEMO ITEM] Earmarked by Archie Phillipie
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0974-82702273130417 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Mark Hinderer	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0974-34533327817917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by T. Krumrey	
City Wauconda State IL Zip Code 60084			
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi			011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E5442-06747072935104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00 [MEMO ITEM] Earmarked by Thomas Eaton
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E5548-37810915708542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Robert Muir
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6452-78620547056198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Steven Apour
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6452-20869082212448 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 35.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Margaret Miksch	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/Type

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6452-36819094419479 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Virginia Skinner	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/Type

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6452-02155703306198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Francis Volpe	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6510-38000124692917 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Patrick Borden

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6452-88569277524949 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Jose Obregon Plaza

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6452-63544863462448 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by John Condon

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6452-15357607603073 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 7.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Marion Reynolds
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6452-41405886411667 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Anthony DeGennaro
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E6452-59966677427292 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Irwin Eleson

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E6510-74927920103073 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by James Fausek
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E6510-84206789731980 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Elwood Brubaker
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-32120913267135 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Andrew Ansal-di
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-84899538755417 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Lester Cundi- ff
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7004-71490114927292 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Hermine Dill- on
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-41198366880417 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Stephen Zale- ski
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-75164431333542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Charles Sauder
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7004-69727724790573 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Alex Martini
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-74259585142136 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Charles Trieble

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-88746279478074 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by G. Brandenbu-rg
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7004-79391115903855 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by William Kidwell
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-49471682310104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Agnes Polasek
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-22956484556198 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00 [MEMO ITEM] Earmarked by Mike Berry
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7004-24451845884323 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Donald Pabst
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-96641176939011 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Kenneth Krueger
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-06817263364791 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Sheila Dowling
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7004-93513125181199 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Rosemary Goetz
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7005-81139773130417 Date of Disbursement 03 / 16 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Pat Peters

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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(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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7004-39910525083542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00 [MEMO ITEM] Earmarked by Ann Tittle
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7005-27241152524948 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Susan Couri
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7004-54810732603073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Charles Heis-ey
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7005-79946535825730 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Travis Rankin

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7483-41964358091354 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Ruth Gensman

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7483-60738772153854 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 100.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Joe O'Donnell

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7845-25213259458542 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Ronald Rep
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B6758-50188845396042 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 7.00 [MEMO ITEM] Earmarked by Donald Heidt
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9388-41758364439011 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Daniel Martin
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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 212 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9931-62342470884323 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by James Healy
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9931-65864199399948 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Dorothy Kohler
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9931-77317446470261 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Suzanne Martensen

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9931-72411745786667 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Greg Piepel
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9931-84974306821823 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Don Stahly
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9931-14655703306198 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Richard Palm- ieri
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9931-47752016782761</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="14.00"/></p> <p>[MEMO ITEM] Earmarked by Rosemarie Hunsney</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9931-03843325376510</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by John Smith</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B9931-67179507017136</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="10.00"/></p> <p>[MEMO ITEM] Earmarked by Laurie Shreeve</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B9931-91482180356980 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Raymond Podmenik
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9931-19265383481979 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Jerry Webb
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B9931-37862795591354 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Patricia Garcia

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B0121-86106508970261 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Larae Kendall
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B0121-07123965024948 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Anne Seebaugh
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B0121-91477602720261 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Peter Helfrich
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B0121-97567385435105 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Paul Donohue
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B0121-59902590513229 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Russell Cass-el
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B0121-15548342466354 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Jorge Miyares
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B6510-88189333677292 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B8873-96336001157761 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E031706-C00414037 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 311.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	311.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E9931-68297976255417</p> <p>Date of Disbursement 03 / 17 / 2006</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM] Earmarked by Mark Gallagher</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E9931-70312136411667</p> <p>Date of Disbursement 03 / 17 / 2006</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM] Earmarked by Bob Edmondson</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial) Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E9931-33588808774948</p> <p>Date of Disbursement 03 / 17 / 2006</p> <p>Amount of Each Disbursement this Period 2.00</p> <p>[MEMO ITEM] Earmarked by Leonard Martz</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9931-04447573423385 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Jean Paul La- plante
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9931-88633364439011 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Ursula Marie
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9931-24026125669479 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Philip Schwa- rtz
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9931-04745119810104 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Henry Houin
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9931-00234621763229 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Agnes Nuttman
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9931-75465029478073 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Edward Briody
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi	011 Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E9931-90122622251511 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Billy Turner
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E9931-26354616880417 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Doris Marsha- li
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E0121-28947085142135 Date of Disbursement 03 / 17 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Robert Ofen- och
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E0183-08849734067916 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Raymond Pogg- ioli	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E0183-10502260923385 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Robert Fergu- son	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: 63675-6278344988823 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 2040.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Robert Fergu- son	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2040.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7284-47553652524948 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
[MEMO ITEM] Earmarked by France Laux		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7284-94930666685105 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
[MEMO ITEM] Earmarked by Tim Perri		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7315-16372317075729 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1000.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08 Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
[MEMO ITEM] Earmarked by Larry Garvey		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7315-14304751157760 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Carlyle Gregory	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7315-00609987974166 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 500.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Druscilla Dohrman	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7285-21838015317917 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Linda Ohlsen	
Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi		011 Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-15111941099167</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="50.00"/></p> <p>[MEMO ITEM] Earmarked by Anne Galivan</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-18757265806198</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p> <p>[MEMO ITEM] Earmarked by Milton Horst</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-56174868345261</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by Richard Otto</p>

SUBTOTAL of Disbursements This Page (optional)

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-31283205747604</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] Earmarked by Barrie McHugh</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-55009096860886</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="100.00"/></p> <p>[MEMO ITEM] Earmarked by Robert McRae</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by Contributor's Original Ch</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7285-22471255064010</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM] Earmarked by Joseph Olin</p>

SUBTOTAL of Disbursements This Page (optional)

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7285-83503359556198 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Everett Kulas
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7285-26331728696823 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Joseph Aschauer
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7285-33733767271042 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Minnie Arao

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7285-95104616880417 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Rita Wilhelm-Rigney
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by Contributor's Original Ch		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E032006-C00414037 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 249.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7284-51383608579636 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Mildred Dunn
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	249.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7285-22513979673385 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 5.00 [MEMO ITEM] Earmarked by Gerald Bush
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7295-62331789731979 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Julia Kabance
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7295-45534914731979 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Nancy Kawich
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7295-98545473814011 Date of Disbursement 03 / 20 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Joseph Nicholas
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7295-41381472349167 Date of Disbursement 03 / 20 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 60.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Mary Townsend
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7295-82923525571823 Date of Disbursement 03 / 20 / 2006	
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00	
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type [MEMO ITEM] Earmarked by Joan Albers

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7295-33178347349167 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Richard Odgers	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		Category/Type 011

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7295-93981570005417 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Effie Avery	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		Category/Type 011

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7295-39280337095261 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 3.00
City Wauconda State IL Zip Code 60084	[MEMO ITEM] Earmarked by Kenneth Rasch	
Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: 80811-7015954852104 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Kathleen Gad- arowski
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: 80811-2509576678276 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Robert Shaw
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: 80811-3455774188041 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Marji Rodrig- ues

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: 80811-629345118994 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Gloria Mayoh
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: 80811-3664056658744 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by B. Gaudino
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: 80811-5064203143119 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Mary Giles

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: 80811-1862756609916 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Jerome Maurs-eth
Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: 80811-6099664568901 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Ralph Calabrese
Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: 80811-1317102313041 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Edward Bitzan

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: 80811-9530450701713 Date of Disbursement 03 / 20 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Arlene Schumacher

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B9236-17933291196823 Date of Disbursement 03 / 21 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 7.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by Contributor's Original Ch Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] Earmarked by Craig Yoder

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E9236-30192202329635 Date of Disbursement 03 / 21 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00
City Wauconda State IL Zip Code 60084	Purpose of Disbursement Transmitted by PAC Check Candidate Name Kathleen Salvi Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Earmarked by Harvey Gutwein

SUBTOTAL of Disbursements This Page (optional) ▶	25.00
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)

PAGE 237 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B2416-89538210630417 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Andrew Sutton
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Contributor's Original Ch - Debt Red Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B2418-13720339536667 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Marianne Braun
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Contributor's Original Ch - Debt Red Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B2418-26394289731979 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Bob Cooper
City Wauconda State IL Zip Code 60084		
Purpose of Disbursement Contributor's Original Ch - Debt Red Candidate Name Kathleen Salvi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		
Category/Type 011		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

PAGE 238 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B2418-95679873228074 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Mary Kaehler
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B2418-97086733579636 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00 [MEMO ITEM] Earmarked by Patricia Hill
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7214-59376162290573 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Florence Campbell
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: B7214-89023989439011 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 10.00 [MEMO ITEM] Earmarked by Alice Strzalka
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B7234-99666994810105 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 15.00 [MEMO ITEM] Earmarked by Philip Yancey
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: B7491-24462527036667 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00 [MEMO ITEM] Earmarked by Josephine Wagner
City Wauconda State IL Zip Code 60084	011 Category/Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

<p>A. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Contributor's Original Ch - Debt Red</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B7491-67487734556198</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by Christine Ca- prio</p>
<p>B. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Contributor's Original Ch - Debt Red</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: B8118-36845034360885</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15.00"/></p> <p>[MEMO ITEM] Earmarked by Robert Hoffm- an</p>
<p>C. Friends of Kathy Salvi</p> <p>Full Name (Last, First, Middle Initial)</p> <p>Mailing Address PO Box 7</p> <p>City Wauconda State IL Zip Code 60084</p> <p>Purpose of Disbursement Transmitted by PAC Check - Debt Reductio</p> <p>Candidate Name Kathleen Salvi</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 08</p> <p>Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Transaction ID: E7234-00576418638229</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p> <p>[MEMO ITEM] Earmarked by Carolyn Harr- is</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7234-57131594419479 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Richard Deitrich
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check - Debt Reductio Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: E7234-97877138853074 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 1.00 [MEMO ITEM] Earmarked by Mary Guerrero
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check - Debt Reductio Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7261-90314882993699 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 30.00 [MEMO ITEM] Earmarked by Shawn Paretti
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check - Debt Reductio Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E7491-86442202329636 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 50.00 [MEMO ITEM] Earmarked by Mary Binieda
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check - Debt Reductio Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B2418-43674868345261 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Patty Cafferata
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

Full Name (Last, First, Middle Initial) C. Friends of Kathy Salvi		Transaction ID: E7491-26868838071823 Date of Disbursement 03 / 27 / 2006
Mailing Address PO Box 7		Amount of Each Disbursement this Period 25.00 [MEMO ITEM] Earmarked by Phyllis Joseph
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Transmitted by PAC Check - Debt Red Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 08		

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Friends of Kathy Salvi		Transaction ID: E032706-C00414037 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 132.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement PAC Check - Debt Reduction		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Kathy Salvi		Transaction ID: B5870-93571108579636 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 6
Mailing Address PO Box 7		Amount of Each Disbursement this Period 20.00
City Wauconda State IL Zip Code 60084	011 Category/ Type	
Purpose of Disbursement Contributor's Original Ch - Debt Red		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

[MEMO ITEM]
Earmarked by W. Krotoski

Full Name (Last, First, Middle Initial) C. Integram		Transaction ID: V63675-9077569842338 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 8421 Hilltop Road		Amount of Each Disbursement this Period 1573.68
City Fairfax State VA Zip Code 22031	011 Category/ Type	
Purpose of Disbursement Mail		
Candidate Name Kathleen Salvi		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

In-Kind

SUBTOTAL of Disbursements This Page (optional) ▶	1705.68
TOTAL 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)

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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)
SUSAN B ANTHONY LIST CANDIDATE FUND

A. Integram Full Name (Last, First, Middle Initial) **Transaction ID:** V64052-0158655047416
Date of Disbursement

Mailing Address 8421 Hilltop Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	6

City State Zip Code
Fairfax VA 22031

Amount of Each Disbursement this Period

800.80

Purpose of Disbursement
Postage

011

Category/
Type

Candidate Name
Kathleen Salvi

Office Sought: House
 Senate
 President
State: IL District: 08

Disbursement For: 2006
 Primary General
 Other (specify) ▼

In-Kind

B. Integram Full Name (Last, First, Middle Initial) **Transaction ID:** V64174-2899591326713
Date of Disbursement

Mailing Address 8421 Hilltop Road

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	0	6

City State Zip Code
Fairfax VA 22031

Amount of Each Disbursement this Period

65.13

Purpose of Disbursement
Postage

011

Category/
Type

Candidate Name
Kathleen Salvi

Office Sought: House
 Senate
 President
State: IL District: 08

Disbursement For: 2006
 Primary General
 Other (specify) ▼

In-Kind

C. Musgrave for Congress Full Name (Last, First, Middle Initial) **Transaction ID:** B7515-25191897153854
Date of Disbursement

Mailing Address 118 West Charlotte Street

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	7		2	0	0	6

City State Zip Code
Johnstown CO 80534

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Transmitted by Contributor's Original Ch

011

Category/
Type

Candidate Name
Marilyn Musgrave

Office Sought: House
 Senate
 President
State: CO District: 04

Disbursement For: 2006
 Primary General
 Other (specify) ▼

[MEMO ITEM]
Earmarked by Larry Garvey

SUBTOTAL of Disbursements This Page (optional)

865.93

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)

PAGE 245 / 245

<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)
SUSAN B ANTHONY LIST CANDIDATE FUND

Full Name (Last, First, Middle Initial) A. Susan B. Anthony List		Transaction ID: V63675-8932916522026 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6
Mailing Address 1420 King Street Suite 550		Amount of Each Disbursement this Period 209.24
City Alexandria State VA Zip Code 22314	Purpose of Disbursement List Rental	
Candidate Name Kathleen Salvi	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	In-Kind
Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type 011	

SUBTOTAL of Disbursements This Page (optional) ▶

209.24

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

10878.98