

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

Immigrants' List

ADDRESS (number and street) 1555 Connecticut, NW
 Suite 200
 Washington DC 20036

Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00430280

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 (12S)

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 07 01 2010 through 09 30 2010

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 Mr Ira Kurzban

Signature of Treasurer Electronically Filed by Mr Ira Kurzban Date 01 31 2011

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

Office Use Only									FEC FORM 3X (Rev. 12/2004)
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SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Immigrants' List

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		3094.26
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	11180.43									
(c) Total Receipts (from Line 19)	16852.23	48282.26								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	28032.66	51376.52								
7. Total Disbursements (from Line 31)	19467.91	42811.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8564.75	8564.75								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Immigrants' List

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	12940.56	37591.56
(ii) Unitemized	3911.41	10650.68
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16851.97	48242.24
(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)	16851.97	48242.24
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.)	0.26	40.02
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))	16852.23	48282.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16852.23	48282.26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	18967.91	42311.77
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	18967.91	42311.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19467.91	42811.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19467.91	42811.77

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16851.97	48242.24
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16851.97	48242.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18967.91	42311.77
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18967.91	42311.77

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 32
(check only one)
 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)
Immigrants' List

<p>A. Full Name (Last, First, Middle Initial) Istvan Babuskov</p> <p>Mailing Address 43 Brandon Ladd Circle</p> <p>City State Zip Code Waynesboro VA 22980</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Danubia LLC Occupation Self employed</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 265.00</p>	<p>Date of Receipt 08 / 28 / 2010</p> <p>Transaction ID: C4766078</p> <p>Amount of Each Receipt this Period 25.00</p>
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<p>B. Full Name (Last, First, Middle Initial) Istvan Babuskov</p> <p>Mailing Address 43 Brandon Ladd Circle</p> <p>City State Zip Code Waynesboro VA 22980</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Danubia LLC Occupation Self employed</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 265.00</p>	<p>Date of Receipt 09 / 02 / 2010</p> <p>Transaction ID: C4786066</p> <p>Amount of Each Receipt this Period 10.00</p>
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<p>C. Full Name (Last, First, Middle Initial) Istvan Babuskov</p> <p>Mailing Address 43 Brandon Ladd Circle</p> <p>City State Zip Code Waynesboro VA 22980</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Danubia LLC Occupation Self employed</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 265.00</p>	<p>Date of Receipt 09 / 09 / 2010</p> <p>Transaction ID: C4786051</p> <p>Amount of Each Receipt this Period 130.00</p>
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SUBTOTAL of Receipts This Page (optional)	165.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 32
	<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)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) Royal Berg		Date of Receipt		
	Mailing Address 33 N. La Salle Street Suite 2300		M M / D D / Y Y Y Y Y 07 / 19 / 2010		
	City Chicago	State IL	Zip Code 60602	Transaction ID: C4718290	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00		
	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 ▼ 1350.00			

B.	Full Name (Last, First, Middle Initial) Royal Berg		Date of Receipt		
	Mailing Address 33 N. La Salle Street Suite 2300		M M / D D / Y Y Y Y Y 08 / 03 / 2010		
	City Chicago	State IL	Zip Code 60602	Transaction ID: C4726017	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00		
	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 ▼ 1350.00			

C.	Full Name (Last, First, Middle Initial) Royal Berg		Date of Receipt		
	Mailing Address 33 N. La Salle Street Suite 2300		M M / D D / Y Y Y Y Y 08 / 09 / 2010		
	City Chicago	State IL	Zip Code 60602	Transaction ID: C4813198	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00		
	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 ▼ 1350.00			

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial) Royal Berg		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	0		2	0	1	0													
Mailing Address 33 N. La Salle Street Suite 2300		Transaction ID: C4813195																				
City Chicago	State IL	Zip Code 60602																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
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 ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1350.00</td></tr> </table>	1350.00																				
1350.00																						

B.

Full Name (Last, First, Middle Initial) Royal Berg		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	6		2	0	1	0													
Mailing Address 33 N. La Salle Street Suite 2300		Transaction ID: C4813196																				
City Chicago	State IL	Zip Code 60602																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>50.00</td></tr> </table>	50.00																			
50.00																						
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 ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>1350.00</td></tr> </table>	1350.00																				
1350.00																						

C.

Full Name (Last, First, Middle Initial) barry berke		Date of Receipt <table border="1" style="font-size: small;"> <tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>0</td><td>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	8		2	0	1	0													
Mailing Address 154 West 18th Street, Apt. 4AD Apt. 4AD		Transaction ID: C4725165																				
City New York	State NY	Zip Code 1011																				
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																			
250.00																						
Name of Employer Kramer Levin	Occupation Attorney																					
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"> <tr><td>250.00</td></tr> </table>	250.00																				
250.00																						

SUBTOTAL of Receipts This Page (optional)	<table border="1" style="width: 100%;"><tr><td>350.00</td></tr></table>	350.00
350.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial) Ricardo Boswell		Date of Receipt MM / DD / YYYY 07 / 09 / 2010
Mailing Address 1611 Grant Street		Transaction ID: C4718898
City Berkeley	State CA	Zip Code 94703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer University of California - Hastings	Occupation Law Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) Valentine Brown		Date of Receipt MM / DD / YYYY 09 / 29 / 2010
Mailing Address 17 N. Girard Street		Transaction ID: C4801626
City Woodbury	State NJ	Zip Code 08096
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Duane Morris, LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.

Full Name (Last, First, Middle Initial) George Bruno		Date of Receipt MM / DD / YYYY 08 / 13 / 2010
Mailing Address 161 North Adams St.		Transaction ID: C4813247
City Manchester	State NH	Zip Code 03104
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
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 ▼ 751.00	

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

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

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 10 / 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A. Full Name (Last, First, Middle Initial)
Boyd F Campbell

Mailing Address 2827 Fernway Drive

City State Zip Code
Montgomery AL 36111-1703

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

Name of Employer Occupation
Immigration Law Center, LLC Lawyer

Receipt For: 2010
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

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

Transaction ID: C4718921

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Boyd F Campbell

Mailing Address 2827 Fernway Drive

City State Zip Code
Montgomery AL 36111-1703

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

Name of Employer Occupation
Immigration Law Center, LLC Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

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

Transaction ID: C4735351

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Boyd F Campbell

Mailing Address 2827 Fernway Drive

City State Zip Code
Montgomery AL 36111-1703

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

Name of Employer Occupation
Immigration Law Center, LLC Lawyer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
800.00

Date of Receipt

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

Transaction ID: C4801673

Amount of Each Receipt this Period
100.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial)
Cory Caouette

Mailing Address 13312 Tireaton Rd

City State Zip Code
San Diego CA 92130

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

Name of Employer Occupation
BSIS Attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2010

Transaction ID: C4718911

Amount of Each Receipt this Period

50.00

B.

Full Name (Last, First, Middle Initial)
Cory Caouette

Mailing Address 13312 Tireaton Rd

City State Zip Code
San Diego CA 92130

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

Name of Employer Occupation
BSIS Attorney

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 16 / 2010

Transaction ID: C4786103

Amount of Each Receipt this Period

50.00

C.

Full Name (Last, First, Middle Initial)
Cory Caouette

Mailing Address 13312 Tireaton Rd

City State Zip Code
San Diego CA 92130

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

Name of Employer Occupation
BSIS Attorney

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 16 / 2010

Transaction ID: C4786105

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)

Immigrants' List

A.

Full Name (Last, First, Middle Initial)

Julie Ferguson

Mailing Address 228So, Bisa Road

City State Zip Code
Miami FL 33129

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

Name of Employer Occupation
Julie C. Ferguson PA attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 525.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 19 / 2010

Transaction ID: C4718894

Amount of Each Receipt this Period
25.00

B.

Full Name (Last, First, Middle Initial)

Angela Ferguson Allard

Mailing Address 4240 Blue Ridge Blvd #315
Ste 315

City State Zip Code
Kansas City MO 64133

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

Name of Employer Occupation
Austin and Ferguson LLC Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 08 / 2010

Transaction ID: C4718903

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)

Angela Ferguson Allard

Mailing Address 4240 Blue Ridge Blvd #315
Ste 315

City State Zip Code
Kansas City MO 64133

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

Name of Employer Occupation
Austin and Ferguson LLC Attorney

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 14 / 2010

Transaction ID: C4786043

Amount of Each Receipt this Period
10.00

SUBTOTAL of Receipts This Page (optional)

235.00

TOTAL This Period (last page this line number only)

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

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

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

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NAME OF COMMITTEE (In Full)
Immigrants' List

A. Full Name (Last, First, Middle Initial)
Stacey Gartland

Mailing Address 301 Mission Street #48E

City San Francisco State CA Zip Code 94105

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

Name of Employer VBon Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 09 / 2010

Transaction ID: C4718900

Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Peggy McCormick

Mailing Address 122 S. Michigan Suite 1800

City Chicago State IL Zip Code 60603

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

Name of Employer Minsky, McCormick & Hallagan Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 07 / 06 / 2010

Transaction ID: C4718292

Amount of Each Receipt this Period 1000.00

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

Mailing Address 888 Maywood Ave

City Maywood State NJ Zip Code 07607

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

Name of Employer Self employed Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt 09 / 27 / 2010

Transaction ID: C4813255

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ► 1525.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 32
(check only one)

<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)
Immigrants' List

A.

Full Name (Last, First, Middle Initial) Gordon Quan		Date of Receipt MM / DD / YYYY 07 / 02 / 2010
Mailing Address 2 W. Terrace		Transaction ID: C4718919
City Houston	State TX	Zip Code 77007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Foster Quan	Occupation Attorney	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

B.

Full Name (Last, First, Middle Initial) Gordon Quan		Date of Receipt MM / DD / YYYY 08 / 02 / 2010
Mailing Address 2 W. Terrace		Transaction ID: C4786110
City Houston	State TX	Zip Code 77007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Foster Quan	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

C.

Full Name (Last, First, Middle Initial) Gordon Quan		Date of Receipt MM / DD / YYYY 09 / 02 / 2010
Mailing Address 2 W. Terrace		Transaction ID: C4786111
City Houston	State TX	Zip Code 77007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Foster Quan	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

Immigrants' List

A.

Full Name (Last, First, Middle Initial)

Kalman Resnick

Mailing Address 70 W. Madison Street

City State Zip Code
Chicago IL 60602

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

Name of Employer Occupation
Hughes Socol Piers Resnick attorney
& Dym, LTD

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4735363

Amount of Each Receipt this Period
250.00

B.

Full Name (Last, First, Middle Initial)

Ted Ruthizer

Mailing Address 522 West End Avenue
Apt. 10A

City State Zip Code
New York NY 10024

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

Name of Employer Occupation
Kramer Levin Naftalis & Attorney
Frankel LLP

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

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

Transaction ID: C4801624

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)

Denyse Sabagh

Mailing Address 1728 Lamont St NW
N.W.

City State Zip Code
Washington DC 20010-2602

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

Name of Employer Occupation
Duane Morris attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 1 9 / 2 0 1 0

Transaction ID: C4735357

Amount of Each Receipt this Period
4000.00

SUBTOTAL of Receipts This Page (optional) ►

7450.00

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

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

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

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

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NAME OF COMMITTEE (In Full)
Immigrants' List

A. Full Name (Last, First, Middle Initial)
Marcine Seid

Mailing Address 1530 The Alameda #310
Suite 310

City State Zip Code
San Jose CA 95126

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

Name of Employer Occupation
Self employed Attorney

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt

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

Transaction ID: C4801637
 Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Melvin Solomon

Mailing Address 6 Eastbrook Drive

City State Zip Code
River Edge NJ 07661

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

Name of Employer Occupation
Parekian & Solomon attorney

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	1	0

Transaction ID: C4726023
 Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ann Spaeth

Mailing Address 15 Laughlin Lane

City State Zip Code
Philadelphia, PA PA 19118

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

Name of Employer Occupation
not employed not employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 555.56

Date of Receipt

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

Transaction ID: C4718895
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial) Lincoln Stone		Date of Receipt MM / DD / YYYY 08 / 03 / 2010
Mailing Address 800 Wilshire Blvd, Suite 350		Transaction ID: C4726019
City Los Angeles	State CA	Zip Code 90017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Law Offices of Stone & Grzegorek LLP	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Joan Suarez		Date of Receipt MM / DD / YYYY 07 / 23 / 2010
Mailing Address 7224 Pershing Ave Apt 3L		Transaction ID: C4786108
City Saint Louis	State MO	Zip Code 63130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer none	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.

Full Name (Last, First, Middle Initial) Joan Suarez		Date of Receipt MM / DD / YYYY 08 / 23 / 2010
Mailing Address 7224 Pershing Ave Apt 3L		Transaction ID: C4766123
City Saint Louis	State MO	Zip Code 63130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer none	Occupation Information Requested	
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)	1100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 32
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial)
Joan Suarez

Mailing Address 7224 Pershing Ave
Apt 3L

City State Zip Code
Saint Louis MO 63130

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

Name of Employer none Occupation Information Requested

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 23 / 2010

Transaction ID: C4801676

Amount of Each Receipt this Period
50.00

B.

Full Name (Last, First, Middle Initial)
Marc Van Der Hout

Mailing Address 515 Hill St.
5th Floor

City State Zip Code
San Francisco CA 94114

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

Name of Employer Self employed Occupation Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2010

Transaction ID: C4718891

Amount of Each Receipt this Period
1500.00

C.

Full Name (Last, First, Middle Initial)
Istvan Babuskov

Mailing Address 43 Brandon Ladd Circle

City State Zip Code
Waynesboro VA 22980

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

Name of Employer Danubia LLC Occupation Self employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
265.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 27 / 2010

Transaction ID: C4805792A

Amount of Each Receipt this Period
10.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional) ► **1560.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Immigrants' List

A.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 396.97

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: C4805792AB

Amount of Each Receipt this Period

10.00

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

B.

Full Name (Last, First, Middle Initial)

Ann Spaeth

Mailing Address 15 Laughlin Lane

City State Zip Code
Philadelphia, PA PA 19118

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

Name of Employer not employed Occupation not employed

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 555.56

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2010

Transaction ID: C4771881A

Amount of Each Receipt this Period

55.56

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ActBlue

Mailing Address P.O. Box 382110

City State Zip Code
Cambridge MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 396.97

Date of Receipt

M M / D D / Y Y Y Y
08 / 08 / 2010

Transaction ID: C4771881AB

Amount of Each Receipt this Period

55.56

[MEMO ITEM]

Note: Above Contribution earmarked through this organization.

SUBTOTAL of Receipts This Page (optional)

55.56

TOTAL This Period (last page this line number only)

12940.56

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Immigrants' List

A. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement credit card processing fee - July Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D327193 Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2010
	Amount of Each Disbursement this Period 28.78 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement credit card processing fee - August Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D327194 Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2010
	Amount of Each Disbursement this Period 31.00 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 360001 City Fort Lauderdale State FL Zip Code 33336 Purpose of Disbursement credit card processing fee - Sept Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D327195 Date of Disbursement M M / D D / Y Y Y Y 09 / 20 / 2010
	Amount of Each Disbursement this Period 15.96 Category/Type
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	75.74
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)

<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)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) Authnet Gateway	Transaction ID: D327187 Date of Disbursement
	Mailing Address 1295 Charleston Road	<input type="text" value="07"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing fee - July Candidate Name	<input type="text" value="35.55"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Authnet Gateway	Transaction ID: D327188 Date of Disbursement
	Mailing Address 1295 Charleston Road	<input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing - August Candidate Name	<input type="text" value="34.65"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Authnet Gateway	Transaction ID: D327189 Date of Disbursement
	Mailing Address 1295 Charleston Road	<input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period
	Purpose of Disbursement credit processing fee - Sept. Candidate Name	<input type="text" value="34.80"/>
	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)	<input type="text" value="105.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Immigrants' List

<p>A. Full Name (Last, First, Middle Initial) Crossroads Campaigns</p> <p>Mailing Address 707 H Street, NW, Suite 300</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement strategic consulting-July</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326696</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Crossroads Campaigns</p> <p>Mailing Address 707 H Street, NW, Suite 300</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement strategic consulting-Aug</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326697</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Crossroads Campaigns</p> <p>Mailing Address 707 H Street, NW, Suite 300</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement strategic consulting-Sept</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326698</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="7500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D327190
	Mailing Address 1295 Charleston Rd.	Date of Disbursement MM / DD / YYYY 07 / 30 / 2010
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 32.93
	Purpose of Disbursement credit card processing fee - July	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D327191
	Mailing Address 1295 Charleston Rd.	Date of Disbursement MM / DD / YYYY 08 / 30 / 2010
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 33.55
	Purpose of Disbursement credit card processing fee - August	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Cybersource	Transaction ID: D327192
	Mailing Address 1295 Charleston Rd.	Date of Disbursement MM / DD / YYYY 09 / 30 / 2010
	City Mountain View State CA Zip Code 94043	Amount of Each Disbursement this Period 28.96
	Purpose of Disbursement credit card processing fee - Sept	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	95.44
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)

<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)
Immigrants' List

<p>A. Full Name (Last, First, Middle Initial) Maryland Comptroller</p> <p>Mailing Address PO Box 17132</p> <p>City Baltimore State MD Zip Code 21297-0175</p> <p>Purpose of Disbursement taxes -withholding 2009</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326751</p> <p>Date of Disbursement 09 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 1489.13</p>
<p>B. Full Name (Last, First, Middle Initial) Amy Novick</p> <p>Mailing Address 1555 Connecticut Ave., NW #200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement strategic consulting - July</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326704</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Amy Novick</p> <p>Mailing Address 1555 Connecticut Ave., NW #200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement rent- July</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326706</p> <p>Date of Disbursement 07 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 208.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2697.13

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 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)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) Amy Novick	Transaction ID: D326710 Date of Disbursement
	Mailing Address 1555 Connecticut Ave., NW #200	<input type="text" value="08"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement strategic consulting - August	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Amy Novick	Transaction ID: D326711 Date of Disbursement
	Mailing Address 1555 Connecticut Ave., NW #200	<input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement strategic consulting - Aug	<input type="text" value="1500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Amy Novick	Transaction ID: D326714 Date of Disbursement
	Mailing Address 1555 Connecticut Ave., NW #200	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement strategic consulting-Sept	<input type="text" value="2500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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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)
Immigrants' List

<p>A. Full Name (Last, First, Middle Initial) Amy Novick</p> <p>Mailing Address 1555 Connecticut Ave., NW #200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement rent - Sept</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326716 Date of Disbursement 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 208.00</p>
<p>B. Full Name (Last, First, Middle Initial) Amy Novick</p> <p>Mailing Address 1555 Connecticut Ave., NW #200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement rent-Aug</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326718 Date of Disbursement 07 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 208.00</p>
<p>C. Full Name (Last, First, Middle Initial) Amy Novick</p> <p>Mailing Address 1555 Connecticut Ave., NW #200</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement mileage - for June event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D326737 Date of Disbursement 08 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 23.40</p>

SUBTOTAL of Disbursements This Page (optional) ▶

439.40

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)

<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)
Immigrants' List

<p>A.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 1913 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement service fee - July</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D327196</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 1913 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement service fee - Sept</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D327197</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) PNC Bank</p> <p>Mailing Address 1913 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement service fee - August</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D327198</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12.00"/></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)

<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)
Immigrants' List

A. Full Name (Last, First, Middle Initial) Westend Press Mailing Address 6130 Brandon Avenue City Springfield State VA Zip Code 22150 Purpose of Disbursement office supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D326738 Date of Disbursement 08 / 10 / 2010
	Amount of Each Disbursement this Period 322.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Wired for Change Mailing Address 1700 Connecticut Ave., NW City Washington State DC Zip Code 20009 Purpose of Disbursement web hosting - July Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D326700 Date of Disbursement 07 / 06 / 2010
	Amount of Each Disbursement this Period 300.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Wired for Change Mailing Address 1700 Connecticut Ave., NW City Washington State DC Zip Code 20009 Purpose of Disbursement web hosting - Aug. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Transaction ID: D326701 Date of Disbursement 07 / 21 / 2010
	Amount of Each Disbursement this Period 300.00
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	922.00
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)

<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)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) Wired for Change	Transaction ID: D326703 Date of Disbursement
	Mailing Address 1700 Connecticut Ave., NW	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period
	Purpose of Disbursement web hosting - Sept	<input type="text" value="300.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Amy Novick	Transaction ID: D326757 Date of Disbursement
	Mailing Address 1555 Connecticut Ave., NW #200	<input type="text" value="08"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement reimbursement- June event	<input type="text" value="69.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) PNC Bank	Transaction ID: D326780 Date of Disbursement
	Mailing Address 1913 Massachusetts Avenue, NW	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement mastercard - Aug.	<input type="text" value="750.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1119.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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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)
Immigrants' List

A.	Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D326787 Date of Disbursement 08 / 31 / 2010
	Mailing Address 1225 Eye St., NW	Amount of Each Disbursement this Period 750.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement web site	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) PNC Bank	Transaction ID: D326783 Date of Disbursement 07 / 31 / 2010
	Mailing Address 1913 Massachusetts Avenue, NW	Amount of Each Disbursement this Period 676.98
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement mastercard - July	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) UPS Store	Transaction ID: D326790 Date of Disbursement 07 / 31 / 2010
	Mailing Address 145 Fleet Street	Amount of Each Disbursement this Period 630.87
	City Oxon Hill State MD Zip Code 20745	
	Purpose of Disbursement copies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	676.98
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)
Immigrants' List

A.

Full Name (Last, First, Middle Initial)
Amy Novick

Transaction ID: D327199
Date of Disbursement

Mailing Address 1555 Connecticut Ave., NW #200

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

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

99.00

Purpose of Disbursement
office furniture - chair

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Amy Novick

Transaction ID: D327201
Date of Disbursement

Mailing Address 1555 Connecticut Ave., NW #200

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

City Washington State DC Zip Code 20036

Amount of Each Disbursement this Period

120.00

Purpose of Disbursement
cell/blackberry - Jan-June 2010

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

219.00

TOTAL This Period (last page this line number only)

1885.69

**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 32 / 32

<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)
Immigrants' List

A.

Full Name (Last, First, Middle Initial)
Bennet for Colorado

Mailing Address 400 S. Colorado

City State Zip Code
Denver CO 80246

Purpose of Disbursement
contribution to campaign

Candidate Name
Michael Bennet

Office Sought: House
 Senate
 President

State: CO District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: D326749

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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