FEC FORM 3X REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee	RECEIVED FEC MAIL CENTER 2008 OCT 17 AM 9: 18 Office Use Only
NAME OF     TYPE OR PRINT ▼     Example: If typing, type       COMMITTEE (in full)     over the lines.	12FE4M5
$\frac{\mathbb{E}MP_{i}O_{i}MP_{i}P_{i}P_{i}P_{i}P_{i}P_{i}P_{i}P_{i}$	$M_{1} = 1$ $M_{2} = 1$ $M_{2$
<ul> <li>4. TYPE OF REPORT (Choose One)</li> <li>(a) Quarterly Reports:</li> <li>April 15 Quarterly Report (Q1)</li> <li>July 15 Quarterly Report (Q2)</li> <li>October 15 Quarterly Report (Q3)</li> <li>January 31 Year-End Report (YE)</li> <li>July 31 Mid-Year Report (Non-election Year Orly) (MY)</li> <li>Termination Report (TER)</li> <li>(b) Monthly Report Due On:</li> <li>(c) 12-Day PRE-Election Report for the:</li> <li>(c) 12-Day PRE-Election Report for the:</li> <li>(d) 30-Day POST-Election Report for the:</li> <li>(e) 30-Day POST-Election Report for the:</li> <li>(f) 30-Day POST-Election Report for the:</li> <li>(f) 12-Day PRE-Election Report for the:</li> <li>(f) 12-Day PRE-Election Report for the:</li> <li>(f) 12-Day PRE-Election Report for the:</li> <li>(f) 12-Day PRE-Election Report for the:</li> <li>(f) 12-Day POST-Election Report for the:</li> <li>(f) 12-Day POST-Election Report for the:</li> <li>(f) 12-Day POST-Election Report for the:</li> </ul>	Aug 20 (M8)       Nov 20 (M11) (Non-Election Year Only)         Sep 20 (M9)       Dec 20 (M12) (Non-Election Year Only)         Oct 20 (M10)       Jan 31 (YE)         General (12G)       Runoff (12R)         Special (12S)       in the State of         Runoff (30R)       Special (30S)         in the State of       in the State of
5. Covering Period 0.1 0.1 2008 through 0.9	ue, correct and complete.
	Date 1.0 1.0 2008
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing to Office Use Only	this Report to the penalties of 2 U.S.C. §437g.         FEC FORM 3X         Rev. 12/2004

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	FEC Form 3X (Rev. 02/2003)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
W	rite or Type Committee Name	BACH COMMUN	12+4 PAC
_		•	/
Re	port Covering the Period: From: 0	7 01 2008	0.9 3.0 20.08
		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1,		J. 2. 2. 1. 6. 3
	(b) Cash on Hand at Beginning of Reporting Period	4.9.6.5.6.3	
	(c) Total Receipts (from Line 19)		<u></u>
! ! 	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	496563	50216.3
<b>7</b> .	Total Disbursements (from Line 31)	0	
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4 9.6.5.6.3	49.6.5.6.3
9.	Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D)	10	
10.	Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D)	0	Jur
	This committee has qualified as a multic	candidate committee. (see FEC FORM 1M)	Juker
 !		For further information contact:	L' an L
!		Federal Election Commission 999 E Street, NW Washington, DC 20463	Jo man of
; 		Toll Free 800-424-9530 Local 202-694-1100	Ø ₩
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	- . D	ETAILED SUMMARY PAGE	<b>–</b>
ļ	FEC Form 3X (Rev. 06/2004)	of Receipts	Page 3
Y	Vrite or Type Committee Name	· · · · · · · · · · · · · · · · · · ·	
:	EMPOWERING	BACH Communit	w PAC
F	Report Covering the Period: From:	7 07 2003	0.7 3.0 2008
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
12 13 14 15 16 17 18	<ul> <li>Contributions (other than loans) From: <ul> <li>(a) Individuals/Persons Other</li> <li>Than Political Committees</li> <li>(i) Iternized (use Schedule A)</li></ul></li></ul>		
20	. Total Federal Receipts		
FE	(subtract Line 18(c) from Line 19)►		

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## **DETAILED SUMMARY PAGE**

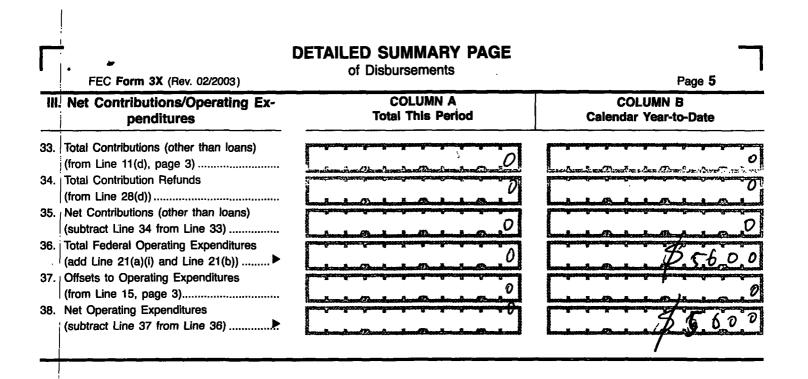
of Disbursements

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	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) Allocated Federal/Non-Federal		
	Activity (from Schedule H4)		
	(i) Federal Share		P.5.6
	[		Lands- American Second Summer Second
	(ii) Non-Federal Share		and and Burkey Charles and the
	(b) Other Federal Operating	0	
		and	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))►		a a a a a a a a a a a a a a a a a a a
22	Transfers to Affiliated/Other Party	Land and the design of the des	the standard the standard the standard the
22.	Committees	0	
23.	Contributions to	Construction of Construction o	Sanahan (markan film)
	Federal Candidates/Committees and Other Political Committees	0	
24.	Independent Expenditures	Landerschwerthereiterschwertensterschwerthereitersch	Second
25.	(use Schedule E) Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	ann an	and the second
	Use Schedule F)	U D	And the second sec
26.	Loan Repayments Made		and and and a short have been the state
07	l Lana Mada	$\bigcap$	
27. 28.	Loans Made Refunds of Contributions To:		hand make (Drade and make and make and the
	(a) Individuals/Persons Other Than Political Committees	θ	
		hand and the first sector of the first sector	Security and the second s
	(b) Political Party Committees	0	
	(c) Other Political Committees	and a second	la serie and series and series and series and series of the series of th
	(such as PACs)		and and and the stand and the stand of the
	d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	θ	
		<sup>1</sup>	Leven 2 and
29.	Other Disbursements	Line of	
30.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity		
	(from Schedule H6)	<b></b>	Succession of sector
	(i) Federal Share	l and a contract of the	and make and the stand of the s
			ไร ไรการก็เหมาะวิจารหนึ่งระหนึ่งการเป็นระหนึ่งแรงขึ้นทระวังการ
	(ii) "Levin" Share	and and and and and and and and and	Land market Bark and Bark and Bark
	(b) Federal Election Activity Paid Entirely With Federal Funds		line of the second s
	(c) Total Federal Election Activity (add	hand and and and and and and and and	Landand and Berlin along Charles and and the
	Lines 30(a)(i), 30(a)(ii) and 30(b)) ►	0	
		Constantion (Charles Charles Charles Charles and	have been show the section of the se
31.	Total Disbursements (add Lines 21(c), 22,	lanen fan selan melo mediana fan sela hered a sela fan sela fan se fan se	
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	D	<b>3.5</b> b.c
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	ี่ <del>โดรมะสีมาณในสารที่มามาในสารในสารมีนามที่เป็นสารใน</del>	
	from Line 31)	θ	Si Ch (
	1	In the second	

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sd	HEDULE A (FEC Form 3X)	1	FOR LINE NUMBER: PAGE OF					
		Use separate schedule(s)	(check only one)					
<b></b>	IMIZED NEVER 13	for each category of the Detailed Summary Page						
	y information copied from such Reports and Statements ma for commercial purposes, other than using the name and a							
$\sum$	NAME OF COMMITTEE (In Full)							
	Full Name (Last, First, Middle Initial)							
<b>A.</b>	· · · · · · · · · · · · · · · · · · ·		Date of Receipt					
	Mailing Address		W. W. B. & B. C. C. V B. C.					
!	City State	Zip Code	<ul> <li>ไหร่างมีสารรณ์ สีระบทร์โหระส์ วินอาจสโหระสรีตระส์ไป</li> </ul>					
ļ	genetation of the second se		Amount of Each Receipt this Period					
		atom to at me for the set	But in and the work on the work on the second secon					
: 	Name of Employer		-					
		Year-to-Date V						
		Barrelandber (Transformelt to State						
<b>B.</b> ]	Full Name (Last, First, Middle Initial)		Date of Receipt					
-	Malling Address		Charles ' Lange ' Lange and '					
	City State	Zip Code	- ก็ของหมิดของไป ซึ่งของกับการใช้ จึงครอบโลกเหมือนของมีการเหลื					
ļ		สารัน และชั่วสา ครได้การเหมือง <b>เล</b> ะดับสู่ และนั้น และเริ่	Amount of Each Receipt this Period					
:	federal political committee.	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	Handarich in Martin Brishand Sanahar Barahari					
	Name of Employer Occupation	1						
		Year-to-Date ▼						
	Primary     General       Other (specify) ▼	And the second						
с.	Full Name (Last, First, Middle Initial)	- #	Date of Receipt					
	Mailing Address							
	City State	Zip Code	Amount of Each Receipt this Period					
	federal political committee	หลางการเราะหน้า การกระการการกระการเราะ	שמיינין מיינקאיני אין איינאראינערער אויטערער איינאראערערער איינאייערערערערערערערערערערערערערערערערערערע					
	Name of Employer Occupation	1	-					
	Receipt For: Aggregate							
!	Other (specify)	รายสารสราชสราชสราชสราชสราชสราชสราชสราชสราชส						
	UBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	รายการกับการก็การกับ จะเป็นสายการการกับการกับการกับการกับการกับการกับการกับการกับการกับการการการการการการการกา การการการการการการการการการการการการการก					
	OTAL This Period (last page this line number only)		and the advant Party Lands and Party and					

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	HEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LINE	NUMBE	R:	<u></u>	PA	GE	O	-
11	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page					в –	24 28c		25 29	
Ar	y information copied from such Reports and Stater	nents may not be sold or used	L I by	any pers	ion for th	e purpos	e of s	olicitin	g con	itributic	ons
or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and address of any political	con	nmittee t	o solicit (	ontributi	ons fro	om suc	h cor	nmitte	θ.
											1
<u></u>	Full Name (Last, First, Middle Initial)	<u> </u>			r	<u> </u>					
A.		ī			Date	of Disbu	rseme	ent			
	Malling Address							ľĽ	- <b>4</b>	<u>чү</u> нү	
	City	State Code								<u></u>	·
	Purpose of Disbursement				Amo	unt of Ea	ch Di	shurse	nent	this Pr	eriod
	Candidate Name			egory/ ype			-	<b></b>			
	Senate	nent Fjor: Primary General		<u> </u>		en de la company	aca, Angalan	Excel <sup>73</sup> h		in a Chu	n,inund
	State: District:	Other (specify)									
B.	Full Name (Last, First, Middle Initial)				Date	of Disbu	rseme	ent			ing a
	Malling Address			<u> </u>	Ľ.			ľĽ	-		
	City	State Zip Code									
	Purpose of Disbursement	1			Amo	unt of Ea	ich Di	sburse	ment	this P	boine
	Candidate Name			egory/ ype	Г		y				
		ment For: Primary ☐ General Other (specify) ▼		<u> </u>							
	State: District:		_								
C.	Full Name (Last, First, Middle Initial)				Date	of Disb	ursem	ent			
	Mailing Address						n de la com	ĽĽ			
	City	State Zip Code								<u> </u>	
	Purpose of Disbursement				Amo	unt of Ea	och Di	ebureo	mont	thic D	oriod
	Candidate Name		Cat	egory/							
	Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) v		<u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	-   <b>1</b> 1		B				
	State: District:		• •	• .						- <u></u>	
	UBTOTAL of Disbursements This Page (optional).			····· ►	C				-		
Ħ	OTAL This Period (last page this line number only	)			Г		-	-			
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# SCHEDULE C (FEC Form 3X)

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

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)	
LOAN SOURCE Full Name (Last, First, Middle Initial)	Election:
	Primary
	General
Molling Address	
Mailing Address	Other (specify)
City State ZIP Coo	
Original Amount of Loan Cumulative Payment To	
	And a
Date Incurred Date Due	Interest Rate Secured:
Date Duel	Secured:
	% (apr) Yes No
List All Endorsers or Guarantors (if any) to Loan Source	
	Name of Employer
1. Full Name (Last, First, Middle Initia)	
Mailing Address	Occupation
	Amount processing and
City State ZIP Code	Guaranteed
	Outstanding:
2. Full Name (Last, First, Middle Nitial)	Name of Employer
Molling Address	Conjugation
Mailing Address	Occupation
11 •	Amount garage or
City State ZIP Code	Guaranteed
	Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
	Amount
	Amount <u>managering and an </u>
City State ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
	1
Mailing Address	Occupation
	Amount gnangenagenagenagenagenagenagenagenagena
City State ZIP Code	Guaranteed
	Outstanding:
	ไม่ระเวลี่การหน้าวระเบิดสาวนี้และเปิดสาวนี้และเปิดสาวนี้และเป็นสาวนี้ 
SUBTOTALS This Period This Page (optional)	
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TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If	no Schedule D, carry forward to appropriate line of Summary.

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## SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Federal Election Commission, Washington, D.C. 20463

F	eder	al Election Commission, Washington, D.C. 20463		
1		E OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER
		DING INSTITUTION (LENDER) Name	Amount of Loan	Interest Rate (APR)
	City	ng Address State Zip Code	Date Incurred or Established Date Due	
		A. Has loan been restructured? No Yes B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	
		Are other parties secondarily liable for the detrincurn     No Yes (Endorsers and guarantors mu     Are any of the following pledged as collateral for the     property, goods, negotiable instruments, certificates of     stocks, accounts receivable, cash on deposit, or other     No Yes If yes, specify:	ust be reported on Schedule C.) loan: real estate, personal deposit, chattel papers,	What is the value of this collateral?
		E. Are any future contributions of uture receipts of intere- collateral for the loan? No Yes If yes, s	specify:	What is the estimated value?
		A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established:	Location of account: Address: City, State, Zip:	
		F. If neither of the types of collateral described above wa the loan amount, state the basis upon which this loan	as pledged for this loan, or if the was made and the basis on wh	amount pledged does not equal or exceed nich it assures repayment.
		G. COMMITTEE TREASURER Typed Name Signature		
		<ul> <li>Attach a signed copy of the loan agreement.</li> <li>TO BE SIGNED BY THE LENDING INSTITUTION: <ol> <li>To the best of this institution's knowledge, the teare accurate as stated above.</li> <li>The loan was made on terms and conditions (in similar extensions of credit to other borrowers o III. This institution is aware of the requirement that complied with the requirements set forth at 11 C</li> </ol></li></ul>	ncluding interest rate) no more fa f comparable credit worthiness. a loan must be made on a basi	avorable at the time than those imposed for is which assures repayment, and has
	Тур	HORIZED REPRESENTATIVE ed Name nature	tle	

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Supplementary for

Information found on
Page \_\_\_\_\_ of Schedule C

SCHEDULE D (FEC Form 3X)		PAGE OF
DEBTS AND OBLIGATIONS	(Use separate schedule(s)	FOR LINE NUMBER:
	for each	(check only one) 9
Excluding Loans	numbered line)	10
NAME OF COMMITTEE (In Full)		
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	ebt (Purpose):
Mailing Address		
City State Zip Code		
·		<u></u>
Outstanding Balarice Beginning This Period		
Amount Incurred This Period Payment This Period	d Outstandi	na Rolance at Class of This Deried
		ng Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Debt (Purpose):
		obt (ruiposo).
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period		····
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )		
Amount Incurred This Period Payment This Perio		ng Balance at Close of This Period
	den de la companya de	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of D	Debt (Purpose):
Mailing Address		
City State Zip Code		
A his after Delege Periode 271 Beded		<u></u>
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Perio	d Outstandi	ng Balance at Close of This Period
	فسنلسط أسطسك	
	ł	
1) SUBTOTALS This Period This Page (optional)		
2) TOTALS This Dodod (lost page this line sumber est.)		
2) TOTALS This Period (last page this line number only)		
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	• I <u>·</u>	
	[	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last pa	age only) >	

#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

ME OF COMMITTEE (In Full)       FEC IDENTIFICATION NUMBER         Check II       24-hour notice       48-hour notice         Full Name (Last, First, Middle Initial) of Payee       Date         Mailing Address       Amount         City       State       Zip Code         Purpose of Expenditure       Category/ Type       Office Sought: President       House       State: President         Name of Federal Candidate Supported       Oppose       Disbursement For: President       Primary       General         Gity       State       Zip Code       Disbursement For: President       Primary       General         Mailing Address       Mailing Address       Disbursement For: President       Primary       General         Mailing Address       State       Zip Code       Date       Mailing Address         Mailing Address       Category/ Purpose of Expenditure       Office Sought: President       House       State:         Name of Federal Candidate Supported or Opposed by Expenditure: for Office Sought       Office Sought: President       House       State:         Name of Federal Candidate Supported or Opposed by Expenditure:       Office Sought: President       House       State:         Name of Federal Candidate Supported or Opposed by Expenditure:       Office Sought: President       House       Stat	EMIZED INDEPENDENT EXPENDITURES	PAGE OF FOR LINE 24 OF FORM 3
Full Name (Last, First, Middle Initial) of Payee       Date         Mailing Address       Amount         City       State       Zip Code         Purpose of Expenditure       Office Sought:       House       State:         Name of Federal Candidate Supported       Opposed by Expenditure:       Office Sought:       House       State:         Full Name (Last, Fire, Middle Initial) of Payee       Date       Date       State:       Description         Full Name (Last, Fire, Middle Initial) of Payee       Date       Description       Office Sought:       House       State:         Full Name (Last, Fire, Middle Initial) of Payee       Date       Description       Office Sought:       Office Sought:       Office Sought:       Calegory       Date         Mailing Address       Category       Office Sought:       House       State:       Description       State:       Description       State:       Description       Description <th>AME OF COMMITTEE (In Full)</th> <th></th>	AME OF COMMITTEE (In Full)	
Full Name (Last, First, Middle Initial) of Payee       Date         Mailing Address       Amount         City       State       Zip Code         Purpose of Expenditure       Office Sought:       House       State:         Name of Federal Candidate Supported       Opposed by Expenditure:       Office Sought:       House       State:         Full Name (Last, Fire, Middle Initial) of Payee       Date       Date       State:       Description         Full Name (Last, Fire, Middle Initial) of Payee       Date       Description       Office Sought:       House       State:         Full Name (Last, Fire, Middle Initial) of Payee       Date       Description       Office Sought:       Office Sought:       Office Sought:       Calegory       Date         Mailing Address       Category       Office Sought:       House       State:       Description       State:       Description       State:       Description       Description <td>Check if 24-hour notice 48-hour notice</td> <td></td>	Check if 24-hour notice 48-hour notice	
Mailing Address       Anount         City       State       Zip Code         Purpose of Expenditure       Category/ Type       Office Sought: President       House President       District: President         Name of Faderal Candidate Supported       Oppose       Disbursement For: Primary       Category/ Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Office Sought: Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Office Sought: Primary       Office Sought: Primary       Disbursement For: Primary       Office Sought: Primary       Office Sought: Prim		Date
City       State       Zip Code         Purpose of Expenditure       Category/ Type       Office Sought:       House       State:         Name of Federal Candidate Supported       Oppose       Distursement For:       Primary       General         Calendar Year-To-Date       Per Election       Distursement For:       Primary       General         Mailing Address       Date       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date       Date         Purpose of Expenditure       Category/ Type       Office Sought:       House       Date         Over category/ Type       Office Sought:       House       Date       Date         Other (specify)       Category/ Calender Year-To-Date		
City       State       Zip Code         Purpose of Expenditure       Category/ Type       Office Sought:       House       State:         Name of Federal Candidate Supported       Oppose       Distursement For:       Primary       General         Calendar Year-To-Date       Per Election       Distursement For:       Primary       General         Mailing Address       Date       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date         Purpose of Expenditure       Category/ Type       Date       Date       Date       Date         Purpose of Expenditure       Category/ Type       Office Sought:       House       Date         Over category/ Type       Office Sought:       House       Date       Date         Other (specify)       Category/ Calender Year-To-Date		
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Calendar for Office Sought		Disbursement For: Drimany General
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FEC Schedule E (Form 3X) Rev. 02/2003

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### Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

Date of Receipt Hand Delivered Postmarked 10/01/05 **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt **Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office** Date of Receipt **Received from Electronic Filing Office** Date of Receipt or Postmarked Other (Specify): 16/17/08 DATE PREPARED PREPARER (3/2005)

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